U.S. Naval Hospital
Park Boulevard, Balboa Park
San Diego
San Diego County
California

HABS No. CA-1548
(Hospital Complex)

PHOTOGRAPHS

WRITTEN HISTORICAL AND DESCRIPTIVE DATA

REDUCED COPIES OF MEASURED DRAWINGS

Historic American Buildings Survey
National Park Service
Western Region
Department of the Interior
San Francisco, CA 94102

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HISTORIC AMERICAN BUILDINGS SURVEY

U.S. NAVAL HOSPITAL
SAN DIEGO

HABS No. CA-1548

Location: South side of Park Boulevard in Balboa Park
City and County of San Diego
California, 92134
USGS Point Loma 1975 Quadrangle
Universal Transverse Mercator Coordinates: 11.486200.3620400.

Original Owner and Occupant: United States Navy

Present Use: Hospital serving Navy, Marine Corps and Coast Guard personnel, retirees, and dependants.

Statement of Significance: THE ARCHITECTURAL/HISTORIC SIGNIFICANCE OF THE NAVAL HOSPITAL

The buildings of the original U.S. Naval Hospital in San Diego, considered as a landscaped ensemble, form a regionally significant work of historical architecture. The group is noteworthy for its harmonious architectural styling, unified planning, subtropical landscaping, and spectacular siting. The group is eligible for the National Register as a historic district. Its buildings are not individually eligible.

Designed by the Washington D.C.-based U.S. Navy Bureau of Yards and Docks, and built under contract by San Diego and Los Angeles construction firms under local supervision by the Eleventh Naval District Public Works Office, the original Hospital compound was completed in stages between 1920 and 1937.

The stucco-clad walls, red-tile roofs, and Renaissance-Baroque ornament are elements of a style termed "California Mission" by the original architects. The style is today termed variously Mediterranean, Spanish Colonial Revival, or simply Spanish. The Hospital buildings are grouped axially and, for the most part, symmetrically, around three landscaped courtyards. This site plan derives from Classical and Renaissance precedents, as promulgated by the École des Beaux Arts. Both the styling and the planning of the buildings reflect the nearby Panama-California Exposition complex of 1915. The lush landscaping follows the horticultural example of Balboa Park.

Project Information: William Rutledge, an employee of Western Division, Naval Facilities Engineering Command, San Bruno, prepared this documentation in 1985 and 86. Woodruff Minor, an architectural historian, also wrote portions of this report. Catherine Taylor edited. Laura Kahapea typed the report.

INTRODUCTION:

This report documents the buildings and history of the U.S. Naval Hospital in San Diego in the event that new uses bring alteration or demolition to the twenty-two original buildings, built in the years 1920 through 1937.

This report pursues four investigative themes set by the Historic American Buildings Survey:

(1) The role of the Naval Hospital within the context of Naval facilities in the San Diego area.

(2) The specific history of the Hospital's site, including: (a) initial planning and development; (b) changes in the plan and evolution of the site; (c) architects, planners, and other significant individuals associated with the site; and (d) historical events or developments associated with the site.

(3) The relationship of the Naval Hospital to the physical and developmental history of Balboa Park and the City of San Diego.

(4) A physical description of the Hospital complex: (a) according to the original architectural plan; (b) as it changed over time; and (c) at present.

This report's first chapter places the program to build the Naval Hospital into perspective as part of a larger program to shift Navy facilities into San Diego in the 1920s. That massive shift came of the convergence of the Navy's program to build a Pacific chain of naval bases and the city's effort to interest the Navy in developing San Diego harbor and thus further local economic development. San Diego donated land, including the Hospital site in Balboa Park, to bring the city economic well-being.

Chapter Two analyzes the Hospital's original architectural design for the sources of its layout and its styling. The Balboa Park site was a product of earlier events in Balboa Park and of the city's promotional efforts to bring the Navy to San Diego. The Hospital's open-ward type buildings were in the older pavillion hospital tradition and the buildings were grouped according to Beaux Arts planning principles. The Mission architectural style marked the Navy's earnest adoption of a regional style to serve political ends.

In Chapter Three San Diego witnesses the Navy's largest building program in the years between the wars. The Hospital was but one of four architecturally significant complexes the Navy's Bureau of Yards and Docks built in San Diego in the 1920s. The construction program brought the economic activity the city had bargained for, but the ever-increasing patient loads caused the Naval Hospital to expand onto additional Balboa Park land. Continued growth and specialization caused the original buildings' interiors to be altered and their functions to be changed.

Finally Chapter Four, Architectural Effects, looks at the structural and decorative changes in the Hospital up to this time. This chapter considers the growing interdependence of the buildings and landscaping as they came to form the visually more acceptable whole that won the Hospital complex eligibility for the National Register of Historic Places.

Discussions within each of the chapters are arranged under subhead titles to allow the reader to use this report as a reference work. The table of contents allows the reader to locate specific topics. Scholarly readers may wish to turn directly to the bibliography.

TABLE OF CONTENTS:

CHAPTER 1: HISTORY OF THE NAVY IN SAN DIEGO

The Navy base we see in San Diego seems a part of the natural setting. But San Diego was not always a U.S. Navy base. Up to the beginning of this century, the Navy had no base in San Diego and it was not a foregone conclusion that the Navy would ever select San Diego.

The San Diego Chamber of Commerce [1]

As early as 1871 the San Diego Chamber of Commerce had stated its goal of making San Diego the headquarters of a military district. The Chamber's emphasis was on attracting Army facilities. Appropriations for Army harbor defense facilities (for building Point Loma's Fort Rosecrans) and for improving the inner harbor (a downtown wharf to land supplies for inland Army posts) did lay some basis for naval facilities.

During the Spanish American War, the Navy chose Army land on Point Loma, the most southwesterly point in the United States, as a place to fuel passing warships. The Point Loma Headland extends into the sea, protecting the San Diego Harbor from northern storms. In those days Point Loma was two hours west of downtown San Diego.

The Navy began building a coaling wharf on the Army's Point Loma Military Reservation land where water was deep enough for shallow-draft destroyers to come up to shore. The coaling station was not completed in time for the war, but the Navy held onto its wartime permission to use the Army land until 1901. In that year the 241 acres of hillside land were finally transferred from Army to Navy custody, and the history of permanent Navy facilities in San Diego began.

The San Diego Chamber of Commerce used the tiny Point Loma coaling station to argue for Congressional appropriations to dredge their beautiful 22-square-mile harbor. San Diego had grown sporadically through booms and busts as a garrison town, a promoter's paper town, a remote railhead, and later as a resort and retirement community. The population had declined after each successive boom (after a 40,000 peak in the boom of 1888 it had dropped to 16,000 by 1890), and the Chamber of Commerce believed that improving the shallow harbor for Navy use would hasten the harbor's commercial development. The Chamber had so far achieved only moderate success playing on national interest to pull in appropriations for their harbor [2].

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[1]This account is based on Kettner's Why It Was Done And How and Klaus' History of the San Diego Chamber of Commerce. Please see bibliography.

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[2]Congress appropriated $80,000 in 1874 to rechannel the San Diego River into False Bay (now Mission Bay) after the river changed its course, dumping silt into San Diego Bay. In 1894 as part of nationwide harbor fortifications for war with Spain, the Army Corps of Engineers had begun a 7,500-foot. breakwater at the mouth of the bay. The breakwater, completed in 1904 at a cost of $500,000, allowed larger ships to stop at San Diego.

The Navy's strategic planning had not accorded San Diego any importance and the tiny city yearned for some role in the nineteenth-century naval expansion that had passed it by.

In 1900 San Diego's Chamber of Commerce sent its secretary, J.C. Wood, to lobby in Washington for further harbor appropriations and resumption of the dormant Panama Canal project. Whereas San Diego was then only a small port of call on a remote coast, the new canal would situate San Diego on the new 10,000-mile-shorter main route of American naval and merchant ships to the Orient. San Diego would be the first American port of call above the border.

But the Navy's interest in San Diego remained limited to deep water berths off Point Loma rather than locations farther into the shallow harbor of San Diego. In November of 1904 the first high-level Navy officers visited San Diego, at the invitation of the Chamber of Commerce, to explore Point Loma for further Navy use. Asst. Secretary of the Navy Charles H. Darling and Frank L. Sargent of the California Naval Militia were accompanied by John Akerman, President of the Chamber of Commerce, on a tour of the harbor en route to an inspection of the Coaling Station on the Point Loma Naval Reservation at deep water. Darling looked at Point Loma as a possible dry dock site.

The Navy also wanted to build a naval radio station on Point Loma rather so that it would not have to rely on a dispatch boat or carrier pigeons to communicate 160 miles to its Pacific Squadron at Magdalena Bay in Lower California, its regular winter drill ground. The squadron would then be able to radio messages back through that Point Loma shore station to its home port in San Francisco Bay or even to Washington, D.C.

On the air in 1907, Point Loma had enough power on good days to communicate 1,008 miles up to North Head, Washington, and 560 miles down to Magdalena Bay, Lower California. In February 1907, after asking the harbor pilot whether the Pacific Squadron's flagship Charleston could enter San Diego Harbor, the Point Loma radio station told the Squadron commander: "Pilot Keith informs me that 26 feet can be carried over outer bar at mean low water.... Pilot does not think Charleston can come in" [3].

Great White Fleet, 1908

For San Diegans, the visit of the Great White Fleet on its round-the-world show of force in 1908 seemed to herald the city's arrival on the national and international scene. The official program, which referred to the fleet as the Famous Peace Squadron making the rounds of the nation's new Floating Empire, gave this order of march through downtown San Diego: the Fort Rosecrans Coastal Artillery Corps, a brigade of Marines, four brigades of sailors, the local National Guard, Naval Reserves, the Grand Army of the Republic, Confederate Veterans, Spanish War Veterans, Uniformed Civic Societies (e.g. Knights of Columbus), the News Boys' Brigade, and the City Fire Department.

Local boosters like to think that the Great White Fleet's visit made San Diego a Navy port of call, as if the Fleet's 16 battleships had steamed straight into the harbor and its 16,000 sailors had swarmed ashore. But the Fleet's battleships had to lay in deep water off the coast while small tenders

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[3]Records of the San Diego Naval Coal Depot.

brought in only 4,600 of its men to parade through downtown San Diego. Local dignitaries departed from the municipal pier on a shallow draft destroyer to make a courtesy call to the Admiral on his flagship.

Photographs of the arrival of the Great White Fleet are provided in the Field Records section of this report, identified as photographs 001 and 002.

San Diego Courts Harbor Development, 1909

In 1909, to attract attention to the harbor's potential for maritime commerce, the Chamber of Commerce proposed that San Diego stage an exposition to identify itself with the opening of the Panama Canal. The Panama-California Exposition Company, organized in 1909, selected D.C. Collier, a prominent developer and civic leader, to organize and promote the fair. Collier chose a site in Balboa Park and recommended Spanish Colonial Revival as the architectural style for the exposition buildings. In spite of San Francisco's announcement (on the day the Panama-California Exposition Company was organized) that it would host the only "official" exposition to celebrate the completion of the Panama Canal, San Diego proceeded with its plans. With a population of around 35,000 in 1910, less than one-tenth the size of San Francisco, San Diego became the smallest city ever to attempt a world's fair.

Ironically, the State Board of Harbor Commissioners, formed in 1889 to oversee the development of state tidelands, did little in the way of bringing harbor improvements for San Diego. Finally, in 1911, the City of San Diego, led by the developer and exposition promoter Collier, persuaded the State Legislature to transfer the jurisdiction and control of the tidelands along San Diego Bay to the city. The legislation stipulated that within five years the city would expend $1,000,000 on dredging and on constructing a pier and a seawall. Bond issues approved in 1912 and 1914 provided $1,400,000 and supported deepening the channel sandbar and building the Broadway Pier. Although these improvements enhanced the commercial value of the harbor, the city's new control over the tidelands was much more significant. San Diego had large tideland areas remaining open for development. City ownership allowed the community to engage in long-range planning and development and to court large developers, including the Navy.

William Kettner - City Booster, Congressman 1913-1920

The new Chamber of Commerce board of directors elected January 7, 1910, focused the business community's attention on port development goals. The Chamber's officers included William Kettner. This board introduced San Diego newcomer William Kettner to men of influence and led to his election to Congress several years later.

Kettner proved extremely effective in his two terms of office in Washington (1913-1920). His first action, before even assuming his seat in the House of Representatives, was to secure a Naval officer's memorandum that spoke favorably of San Diego. In March 1913, Kettner secured a $249,000 appropriation from the House Committee on Rivers and Harbors for the city's dredging project, which went on to gain the approval of the Senate Commerce Committee through the support of Senator John D. Works of California. Kettner was appointed to the Committee on Rivers and Harbors in June 1913, a coup for

a freshman Congressman. During Kettner's tenure on the committee, four different appropriations totaling $1,100,000 were made for harbor improvements in San Diego Bay. He culminated his career in Congress as a member of the House Naval Affairs Committee, to which he was appointed January 1918. [4]

Kettner helped secure appropriations in May 1914 for the construction of naval shore facilities in San Diego. The earliest construction was on Army land, the Point Loma Military Reservation. The appropriations were $45,000 toward completing the wharf at the coaling station (started in 1898) and $50,000 toward converting its coal depot into a fuel oil station. (Navy ships were being converted from coal to oil.)

In March 1915, Kettner came home to San Diego and met Marine Corps Colonel Pendleton for the first time. Pendleton gave Kettner a copy of the speech he had made the previous September praising San Diego as the site of a new Marine Advanced Base. Although Kettner had been thinking about more naval installations for San Diego, the idea of the new Marine Corps unit there apparently had not occurred to him until this meeting.

Pendleton's Campaign for an Advanced Marine Base at San Diego, 1914

Immediately prior to the war, the Marine Corps had been evolving toward a new structure of permanently organized expeditionary units with fixed bases of their own. The new units, called Advanced Base Forces, would be of regimental size or larger and located near the potential theaters of operation, ready to support fleet actions.

U.S. Presidents had used Marines with naval forces in Panama (1903-1904), Colombia (several times), Nicaragua (1912-1913), and Mexico (1914). Wilson had ordered the naval occupation of Vera Cruz and deployed naval forces off the west coast of Mexico as well. A new West Coast Marine Corps regiment of troops at Mare Island and Bremerton was deployed in May 1914 down the coast of Mexico. When that regiment came back in July 1914 it camped on the tip of the sand spit now called North Island.

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[4]William Kettner, an insurance salesman who moved to San Diego from Visalia in 1907, was elected in 1912 to represent the 11th congressional district, a vast territory which included San Diego. Kettner was born in Michigan in 1864. He moved to California in 1885, lost his savings in a mining scheme in the mountains east of San Diego, and eventually settled in Visalia in 1893 where he was a realtor and insurance agent active in fraternal organizations and civic affairs. Following a divorce, he moved with his second wife to San Diego in the fall of 1907. Kettner was at home in the promotional ambience of San Diego. He joined numerous organizations, achieving local recognition in 1908 by organizing the Chamber of Commerce's festivities for the visit of the Great White Fleet. It is remarkable that he was elected to Congress after only five years in San Diego.

The Panama Canal was scheduled to open in August of that year. San Diego and San Francisco would hold their separate expositions that winter to celebrate the canal. San Diego Marine Commanding Officer Colonel Joseph H. Pendleton participated in both expositions. He sent his 1st Battalion to the San Francisco Exposition to set up a demonstration camp for public relations and recruiting purposes. His 2nd Battalion remained in San Diego to demonstrate for its exposition there. Marine Corps Headquarters had assumed Pendleton would establish his regimental headquarters near the Navy's West Coast battle fleet headquarters at San Francisco Bay, at least for the duration of the two expositions, but Pendleton surprised them. He established his headquarters in the San Diego Exposition grounds, and he began to lobby for a permanent Marine base in San Diego [5].

On September 16, 1914, Colonel Pendleton spoke of San Diego as the site for a Marine Advanced Base at a banquet celebrating the renaming of an armored cruiser the San Diego. He praised its location's strategic advantages and local training areas, and he recognized the fine welcome the locals had given his Marines.

Pendleton sent a copy of his speech to the Commandant of the Marine Corps. In February 1915, a Marine Colonel friend of Pendleton's reminded him that Headquarters had had no plans whatsoever to establish any Marines in San Diego until the moment Pendleton and Aubrey Davidson, president of the Exposition, had asked Headquarters for a Marine detachment for the fair.

High-Level Navy Interest in San Diego Land, 1914-1915

In 1914 Navy Secretary Daniels sent his Assistant Secretary of the Navy Franklin Delano Roosevelt as advance man to plan presidential visits to the forthcoming 1915 San Francisco and San Diego Expositions. On this same trip the Navy asked Roosevelt to look at the Point Loma Coaling Station land as a potential site for either the Naval Training Station that might be transferred from San Francisco Bay or as the base for a mobile regiment of Marines [6].

The ranking naval officer in San Diego, Commander Davis of the Recruiting Office, escorted Mr. and Mrs. Roosevelt on a tour of Naval facilities. Because there were no naval craft in the harbor, Commander Davis arranged for them be taken on John Spreckel's yacht, with lunch en route, to the Coaling

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[5]This account is based on Gordon's The Marines Have Landed and San Diego is Well in Hand.

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[6]Because Mr. Roosevelt had been interested in the use of the Colonial Revival style of architecture in New York state, we looked into the possibility that Roosevelt might have taken a personal interest in the design of naval facilities in the Spanish Colonial Revival style. We also thought that Mrs. Roosevelt might have been interested in the Naval Hospital because her 1917 work toward improving conditions for sailors and Marines in St. Elizabeth's asylum in Washington had marked her entry into public life. But an examination of the Roosevelts' papers (in the Roosevelt presidential library in Hyde Park) failed to reveal either had any role in the planning or construction of the San Diego facilities. When he and his wife visited those facilities during World War II, they apparently took no personal credit.

Station. There, the Boatswain in charge demonstrated where coal was stored on the limited amount of level ground next to the water.

The second day Commander Davis took the Roosevelts in a touring car, with golf at the Point Loma Country Club en route, to the Naval Radio Station high above the Coaling Station. There a Navy officer who was visiting to "test ether wave distance," showed Roosevelt the plans for the new high-powered station at Chollas Heights, several miles inland. After a Chamber of Commerce luncheon and a tour of the area, a moving picture cameraman took several hundred feet of newsreel as Roosevelt's car was the first to cross the Cabrillo Canyon Bridge to enter the 1915 exposition grounds. According to a San Diego Union reporter, when Roosevelt was pressed to comment on the Navy's future role in San Diego, he "let it be inferred" that the Navy might transfer a few torpedo boats to San Diego after the canal was open. The Union headlined the story, "San Diego To Be Great Navy Base, Says Roosevelt."

After his first visit, Roosevelt's only official action was a simple memo increasing the Coaling Depot staff by one mechanic, one laborer, and one watchman. He also stated that "in view of the probable gradual increased use of this Station in the near future, the facilities for coal handling should be increased and improved."

In 1915 Roosevelt accompanied Vice President Marshall to the San Francisco and San Diego Expositions when President Wilson cancelled his scheduled visit and sent Marshall on his behalf. On this second trip, Roosevelt found the San Francisco climate to be cold and damp and became a strong advocate of moving the naval training facility already established in San Francisco Bay to San Diego. In response to Roosevelt's enthusiasm, the Chamber of Commerce invited the Navy Training Station Commander to investigate training facility sites in San Diego.

Secretary of the Navy Josephus Daniels also visited San Diego in 1915. Daniels, like Roosevelt, was converted to the idea of San Diego as a location for naval shore facilities. An excerpt from Daniel's autobiography (published in 1944) suggests San Diego's promotional panache in those years:

> "At San Diego our reception had a cordiality all its own .... Its representative in Congress, 'Bill' Kettner (he was affectionately called 'Bill' by his associates in Congress as well as by his home folks) had talked to me in Washington on the advantages of San Diego as a Naval base, and the whole population was united to convince the new Secretary that San Diego was by far the best site for Naval bases on the Pacific .... We were the guests of the grandson of President Grant, who owned the most modern hotel, and upon leaving San Diego for Los Angeles en route to Washington, we were the guests of John D. Spreckels on his yacht. (Mr. Spreckels owned the chief newspaper in San Diego and boosted the place with persistence.) It was a voyage so delightful it remains fixed in my own and my wife's lasting recollection .... As a result of that visit and my knowledge of the climate and the fact that San Diego was the nearest port on the Pacific to the Panama Canal, before my term of office expired [several naval facilities] had been established at San Diego."

Upon returning to Washington, Daniels ordered Marine Commandant Barnett to choose among the sites being offered within the San Diego area. Barnett chose

a 232.24-acre tract along the bay shore offered by its private owners for approximately $250,000. While Kettner lobbied at his end in Washington, Pendleton worked in San Diego on Washington visitors. He took particular care to entertain the members of the House Rivers and Harbors Committee who visited San Diego at almost the same time as General Barnett.

In January 1916 Kettner introduced legislation funding the land purchase Barnett had favored. A municipal referendum approved, by a vote of 40,288 to 305, the city's offer to donate 500 acres of submerged tidal flats adjacent to the tract that the Marines wished to purchase. The city considered a Marine Corps base an esthetic improvement over the mud flats.

The House Committee on Naval Affairs travelled to San Diego to view Kettner's proposed site for themselves. They were impressed. Congress approved it on August 29, 1916, and the Navy Department took an important step in acquiring land for a major naval base.

Up to this point, the Navy had begun establishing itself in a very small way by transfers of government land on Point Loma. All the early sites were at the mouth of the harbor to serve passing ships. None were well inside the harbor or on purchased land. (The Navy had set aside 12.5 acres of the Coaling Station for a Point Loma Naval Radio Station in 1906. In 1909 the Navy gained custody of an old Army Torpedo Station for the sort of torpedos now termed harbor mines to established a Navy Torpedo Station.)

Then by the eve of World War I the Navy made its first three purchases within the heart of San Diego. In 1912 when the Navy was building its first high-powered worldwide radio network, Kettner persuaded the Navy that its West Coast relay station (relaying messages from Arlington headquarters to Pearl Harbor and on to Cavite) belonged in San Diego. The Navy purchased the Chollas Heights Naval Radio Station site from a private owner for $15,000. In 1916 Congress authorized the Navy $250,000 to buy the 232-acre privately owned parcel that Marine Corps Commandant Barnett had selected (a purchase that brought with it the City of San Diego's donation of adjoining tidelands). Then in 1917 the process accelerated when Congress passed bills to purchase part of North Island for an Army Flying Corps base and the remainder for a Naval Air Station.

The Navy was acquiring these components through a seemingly ad hoc process. We have not found any reference to a master plan that speaks of bringing those components together to create an all-around naval base. The driving forces behind this scattering of new naval facilities were the most recent naval doctrine and technology: radio communications, torpedo boats, deployment of marine infantry for overseas operations, and naval aviation. The outbreak of World War I interrupted the possibility of building facilities on any land the Navy and Marines might acquire in San Diego. Yet staff planning for the Pacific chain of bases gained momentum as a result of the war.

Roles for West Coast Bases, 1919

By the end of World War I the American West Coast had emerged in Navy planning as the stem for supply and material that earlier planning had assumed would come around the Horn or later through the canal. The West Coast would at last become a base for operations, even though the ships it would supply might be

last-minute transfers from the Atlantic Fleet. A major share of the Navy's $5.5 million budget would go for building shore facilities on the West Coast and Hawaii. San Diego aspired for a role in this new arrangement.

Despite years of planning for San Francisco Bay and earlier priorities which saw no advantage to locations farther south than San Francisco, the issue was eventually resolved in favor of Los Angeles. Los Angeles emerged as a great industrial base with a modern harbor closer to the fleet assembly point at Hawaii.

San Diego was less well suited than Los Angeles for a naval base. San Diego was less well fortified and more vulnerable to land attacks across the Mexican border; its railroad and steamship connections were inferior; it was a smaller hinterland and of less commercial importance; it had restricted areas of 35-40 foot anchoring depths; and it had a limited supply of skilled labor and neither large machine shops nor ship repair facilities. Yet after the battleship group was headquartered in San Pedro with its capital ships tying up in the Long Beach portion of the Los Angeles harbor, San Diego began to benefit, as the Navy transferred component after component to Southern California, because San Diego could offer a southern defense for Los Angeles and provide it with supplies and personnel.

The place of San Diego in the Navy's planning process shows the Navy's plans had always been elastic enough, intellectually and geographically, to allow arguments in favor of disparate locations all the way from Puget Sound to San Diego. The process was also flexible enough to accommodate political pressures toward one site or another. It is ironic that San Diego's craving for a naval base, founded on a groundless belief in its destiny as a natural harbor, did succeed in attracting naval facilities, yet not the types that required a deepwater harbor. (Not until Federal expenditures continued into the 1930s was the harbor dredged deeply enough take the first aircraft carrier.)

Final Gifts of City Land, 1919-1920

The Naval Affairs Committee visited San Diego immediately after the war to look over the wartime concrete ship plan (owned by the U.S. Shipping Board's Emergency Fleet Corporation) as a possible Naval Ship Repair Station site. They passed favorably on the site and transferred it to Navy custody in September 1919. In a related exchange of small parcels with the city under terms favorable to the Navy, the city donated its vestigal rights to the site and to adjoining tidelands. The site quickly became the home port for a destroyer squadron, and thereafter was known as the Destroyer Base.

Not until 1919 did Congress authorize the Navy to accept a donation of land for a naval training station. Back in 1915 the Chamber had shown the San Francisco Training Station commander one site on False Bay (now Mission Bay), another on the lower end of Silver Strand, and a third on privately owned land at the near end of Point Loma. The commander had convinced the Chamber that the Training Station would relocate only to the tideland site next to the prospective Marine Corps Base. The Chamber agreed to raise money, buy the site, and give it to the Navy.

But the Chamber's offer gave Congress pause for considering the overall size of the buildup in San Diego not only the cost of building facilities on all the aforementioned land parcels, but also the cost of building support facilities such as a hospital and a supply depot. Accordingly, Congress stipulated that the government would accept the training station site only if the government were given a site for a hospital. The City decided to donate Balboa Park land in return for the agreement to build the Naval Training Station. The process of city land donation culminated when Secretary Daniels asked for the block of city-owned land adjoining the municipal pier for a supply depot and the city deeded the 1.55-acre parcel to the Navy in June 1920.

The choice of a Balboa Park hospital location grew out of the historical circumstances of World War I in San Diego. Locating a hospital in a public park has vexed some people as inappropriate since that time. During the War the Chamber had invited newly arriving Navy units to camp in the abandoned exposition grounds in the park, along with the Marines still camped there waiting for the Navy to build facilities on the newly purchased Marine Base site. The Training Station set up a large Naval Training Camp inland from the Marine Corps area. The Naval Aviation contingent ran ground school in the park until their North Island flight school got underway.

The Navy Medical Corps dispensary, which had accompanied the Marines from their 1914 arrival, became another large separate camp. In June 1918 the first units of the medical department reported to the training camp's Sick Quarters to increase the level of specialization. By the time of the November 1918 Armistice, that field hospital's tent colonies had reached a bed capacity of over 800. The Training Camp was abandoned May 1919, but the Navy designated the camp's old Sick Quarters as a hospital in its own. That field hospital remained in full operation when the 1919 influenza epidemic struck.

The Navy wished to continue in that location. But after long discussions, the Navy and the city agreed that the field hospital would have to move away from the exposition area to a permanent site, but to a site still within the park. They agreed on an undeveloped site on the fringe of the park called Inspiration Point. Who selected Inspiration Point is not clear. Congressman Kettner recalled that it was City Councilman Moore who first suggested that site.

The Navy was active in the matter of a hospital site. In 1918, the Navy's Chief Pharmacist suggested at a Chamber of Commerce luncheon that the city donate a tract of land for a permanent naval hospital to serve San Diego's growing Navy base. In the fall of 1918, under Public Works Officer Commander Leonard M. Cox, "investigations were made upon the best location for a Naval Hospital at San Diego, to accomodate the needs of the local stations and the needs of the ships attached to the Pacific Fleet when in neighboring waters." Secretary of the Navy Josephus Daniels and members of the House Naval Affairs Committee (including Kettner) visited to look at the proposed sites in March of 1919. Local Navy officers likely briefed Daniels concerning the preferable hospital sites.

Years later, Secretary Daniels recalled,

> "Leading citizens showed me half a dozen sites for a Naval Hospital. All the time my heart was set on an elevation in Balboa Park for a Naval Hospital, but the committee showed me every other possible location. I was not impressed with any of them. I finally said 'Let us drive through Balboa Park.' When we reached the eminence I had in my mind picked out for the Hospital I asked 'Bill' [Kettner] to stop so that we could stand upon the hill in Balboa Park and get a view of the Pacific Ocean and beautiful Point Loma in the distance. If you will deed this site, I said to 'Bill' and the committee, I will recommend to Congress the erection of a modern hospital at San Diego."

The site they agreed on for the U.S. Naval Hospital was 17.04 acres on a southern promontory in Balboa Park. The promontory, a spur of the park's central mesa, is a quarter-mile long north-south ridge that declines only slightly in elevation before dropping off steeply to Florida Canyon on the east and sloping into a fairly shallow arroyo on the west. The southern tip affords a panoramic view of downtown San Diego and Coronado and so was named Inspiration Point.

In May 1919, Daniels changed the designation of the existing medical camp in Balboa Park from "War Dispensary" to "Naval Hospital," a formality that placed the Navy in a better position to accept a land grant and to receive federal appropriations.

In July 1919 the Navy accepted the Chamber's gift of a 135-acre Training Station site along with adjacent city-owned tidal lands, and also the 17.04 acre hospital site in Balboa Park. The lands were deeded to the Navy by the City of San Diego on September 4, 1919, and the donations were ratified by San Diego voters on August 3, 1920.

Thus, by the end of the decade the Navy had a complete array of specialized sites for a naval operating base. The first sites were hand-me-downs from the Army's Point Loma land to be used for Navy coastal services. The second sites were purchased from private property owners to be used for high technology naval facilities. The last sites, including that for a hospital, were gifts to the Navy for bringing the Training Station and the warships into the harbor area.

The community expected the Navy, in exchange, to spend large sums on construction and bring a steady payroll into the city. The community, moreover, expected the Navy to build architecturally significant complexes on the four major sites. (Those four were: (1) the Marine Corps Base, (2) the Air Station, (3) the Training Station, and (4) the Hospital.) Thus the new Naval Hospital was to be part of a larger architectural program to beautify the city.

Here is a summary of the land the Navy acquired from 1901 to 1920:

NAVY LAND ACQUISITION IN SAN DIEGO

Sep 1901	Coaling Station	241 ac	Transfer from War Dept.
Sep 1906	Radio Station	12.5 ac	Transfer from Coaling Station
Mar 1909	Torpedo Station	n.a.	Transfer from War Dept.
Aug 1912	Chollas Heights Radio Station	73.65 ac	Purchase from Henry Carling
Aug 1916	Marine Corps Advanced Base	232 ac	Purchase from San Diego Securities Co.
Aug 1917	Naval Air Station, North Island	554 ac	Forced purchase from Coronado Beach Co.
Jul 1919	Naval Training Station	135 ac	Donation from Chamber of Commerce
Jul 1919	Naval Hospital	17.04 ac	Donation from City of San Diego
Sep 1919	Destroyer Base	77.2 ac	Transfer from U.S. Shipping Board (and City donation of adjacent tideland)
Jun 1920	Naval Supply Depot	1.55 ac	Donation from City of San Diego

(The Imperial Beach Radio Compass Station is not included in this list because it was strictly speaking not part of the San Diego complex, but was established in 1920 as part of the Pt. Arguello, Port Hueneme, Pt. Fermin, Avalon, Point Loma, and Imperial Beach radio compass navigation system.)

CHAPTER 2: THE ARCHITECTURAL HISTORY OF THE HOSPITAL

A 1920 architectural sketch shows the hospital was planned to be an attractive group of Mission style buildings on a promontory of Balboa Park. That sketch is shown on page 31 of this report. The group is noteworthy for its harmonious architectural styling, unified planning, and spectacular siting. This chapter traces sources of that original design.

Hospital Site in Balboa Park

A 1920 topographic map of the Naval Hospital site shows an old concrete foundation on Inspiration Point, a cottage and stable on a knoll to the southeast, and an unpaved road that ran along the east edge of the ridge and wound down the south face of the promontory to the city grid below. The hospital site was a spectacular back door into the park, a vista point accessible only by the unpaved road and removed from the mainstream of Balboa Park's improvements. It was an idyllic place with grass, scattered eucalyptus trees, quiet gravelled carriage drives, and distant views of the harbor [1].

We can see the condition of Inspiration Point immediately before construction of the hospital in the site plans identified as HABS-CA-1548-63 and HABS-CA-1548-64, and also in the Field Record photographs numbered 012 through 016 which show the site being cleared for construction.

History of the Park Setting, 1868-1915

In 1868 the San Diego Board of Trustees set aside 1,400 acres for a city park. San Diego's was the second largest urban park in the United States after New York's Central Park, and it preceded San Francisco's Golden Gate Park by two years.

The area was nearly square, measuring one and one-half miles across, a high flat mesa overlooking the town and bay. Deep arroyos cut through the mesa from north to south. The landscape was dry and barren. Chaparral and cacti were the only vegetation, except in spring, when wildflowers carpeted the hills. Water and topsoil had to be imported before this land would become the English-style park of grass and trees it is today.

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[1]The foundation may have been the remnant of a home for indigent women, later converted to an orphanage that was built by the Women's Home Association in 1887. (One of the few buildings erected in Balboa Park in the nineteenth century, the orphanage had an address on 16th Street, a city street which came into the park from the south before its severance by the Crosstown Freeway (I-5) in 1959 and which remains on the north-south axis of the Hospital site.) The road indicated on the 1920 topographic map is almost certainly the old northward extension of 16th Street. While the cottage and stable have not been documented, they probably were erected after 1903 as part of the comprehensive park improvements begun that year.

Little was done to the land until the 1890s when local volunteers began planting the western edge under the direction of locally celebrated horticulturist Kate Sessions. In 1902, the Chamber of Commerce appointed a Park Improvement Committee that invited John McLaren, Superintendent of Golden Gate Park, to visit the park. On McLaren's suggestion in October of that year the committee retained Samuel Parsons, Jr., consulting landscape architect for New York's park system.

Grading and landscaping began in the summer of 1903 according to Parson's plan, which called for preserving the natural contours of the land. By 1910 roadways had been built, a partial water system installed, and landscaping was completed along the length of the park's western edge. The work was initially financed by private donations. After 1905 municipal taxes came to be administered by a Park Commission for further landscaping and improvements.

In 1910 the Park Commission sponsored a contest to find a name for this hitherto unnamed park. They named it Balboa Park. This marked a major new phase of the park's development. The Panama-California Exposition Company selected Balboa Park as its fair site, and in August 1910, voters approved a $1,000,000 bond issue to improve the park. These funds, along with $3,000,000 eventually raised by the fair's organizers, supported an ambitious scheme that permanently altered the park and set precedents for its future uses.

The main 1915 exposition buildings stood along an east-west axis (El Prado) on the central mesa of the park. Visitors approached them by a spectacular new bridge crossing the arroyo to the west. Secondary buildings and concession stands extended to the north and south. Park Boulevard with its electric streetcar line was cut through the park to run northeast past the exposition site, and coincidentally past Inspiration Point. Most of the exposition buildings were meant to stand only for the duration of the 1915-'16 fair, but popular acclaim won their retention and eventual reconstruction. This unforeseen city-within-a-park, with its paved boulevard and streetcar access from downtown giving access also to Inspiration Point, set a precedent for the construction of other independent groupings of buildings in Balboa Park.

Architectural Design: The Original Drawing of the Hospital "Groups As Projected"

The design produced by the Bureau of Yards and Docks for the U.S. Naval Hospital shows an architecturally harmonious grouping of two- to four-story buildings organized axially and for the most part symmetrically around open courts. The original perspective drawing, reproduced here, was titled "Groups As Projected." Its basic layout and design were realized to a great degree in the hospital's construction.

The original drawing's bird's-eye view shows a major axis running true north-to-south along the ridge of the Inspiration Point promontory, parallel to the sides of the long rectangular 17-acre Navy parcel. The principal buildings of the hospital formed three quadrangles interconnecting along the main axis; arcaded or cloistered courts formed the core of each quadrangle. The three squares that made up the long north-south rectangle we will call the

central compound. At the far north end of the site next to Park Boulevard, residential structures were to be grouped around a central green. The underlying functional pattern was of three groups: (1) a working hospital in the central compound, (2) the support facilities on the eastern slope, and (3) a residential green to the north. These were the three "Groups" that the original drawing caption refered to.

A horseshoe-shaped access road from Park Boulevard ran south into the hospital grounds past a gate house, continued south along the western border of the site past the central compound, looped around Inspiration Point at the south end, and returned back up the east side of the central compound past support structures (power house, store house, shop building, and enlisted personnel quarters).

The hospital was a new Park Boulevard streetcar stop and its personnel would come and go by trolley. Its few service trucks, ambulances, and visitors' autos were provided ample parking on the hospital grounds. Parking was adeguate for about a decade. When the site's last open spaces were built over, the plan became suddenly obsolete.

The apparent architectural orientation of the hospital group, however, was not the same as its functional orientation to the main road and rail entrance on the north. Its architectural orientation was to the west, with its principal facade facing downtown San Diego and the Bay for tourists to view and its utilitarian rear backing onto Florida Canyon to the east. The twin towers of the Administration Building presented a formal entry from the west, but patients, visitors, and employees actually came and went from the north.

All its buildings, with minor exceptions, were to be finished with pastel stuccoed walls and red-tiled roofs. Most buildings were ornamented sparingly with cast-stone trim of restrained Renaissance-Barogue derivation. The overall style of the group, though often called Mission at the time, would be termed Spanish Colonial Revival, or Mediterranean by today's nomenclature.

The focal point of the composition was the Administration Building, the centerpiece of the group's west facade, facing downtown San Diego. The front elevation of this building, with two massive towers flanking an arcaded entrance, powerfully evoked Spanish colonial cathedral and mission architecture. It unmistakably announced the stylistic intentions of the designers, particularly when seen in silhouette from the park and from downtown. It was the visual symbol of the Hospital group.

The Administration Building was flanked by matching ward buildings which together formed the long west side on the central compound. The western facade grew in height from each end toward the center, beginning with a small flat-roofed two-story facade at each end, rising to the height of a hipped roof over most of the two-story wards' lengths, and then to three stories where the cross-axial buildings intersected from behind, and finally to an open roof-top third-story solaria covered by pergolas at the inner ends of the wards where they met the central three-story Administration Building.

The corresponding east side of the compound was formed by a three-story central Subsistence Building (dining hall) on east-west axis behind the Administration Building, also flanked by two-story matching ward buildings.

The north and south ends of the court between the Administration and the Subsistence buildings were closed by two-story buildings on east-west axis. These two lower interior buildings, an Operating building on the north and a receiving (Out Patient) building on the south of the central court, were set at right angles to the long sides of the compound, thus separating the long rectangle into three interior courts, or quadrangles, of equal size. All the buildings of this central compound were connected by sidewalks that followed the perimeters of the interior courts. The sidewalks were covered, their collonades giving a cloistered effect. There were none of the present-day second-story gallery-type walkways in the original plans.

Around the main compound were added the remaining buildings of the hospital: a detached isolation ward to the south that repeated the high center and low wing motif; an industrial (shop) building to the east on the same east-west axis with the administration and subsistence buildings; an unidentified building also on the east, with steep gables and a residential appearance that may have been an early sketch for the Red Cross Convalescent House; and to the north, an officer's ward in a slightly Palladian style.

That Sick Officers' Ward formed one side of the proposed northern residential green, facing the staff officers' single-family houses on the north side of the green, whose backyards were the part of the hospital nearest to Park Boulevard. (The City gave the hospital no frontage along Park Boulevard, only a narrow entrance road.) The focal point of the residential group, at the eastern end of the green, was the Nurses' Quarters, again a massive neo-classical building with the three-story center and two-story wings. One plan shows an oval-shaped street around the green, a naturalistic contrast to the generally geometric plan.

Finally, the utility buildings and whatever else was left over were placed out of sight on the east side along the visually isolated back road. The enlisted men who served as orderlies--Hospital Corpsmen--were to be housed in a building at the rear of the compound, at a location that is not clear from the original perspective and plot plans. (It is interesting, and revealing, to contrast the conspicuous siting of the Officers' Ward in the residential section of the compound with the uncertain placement of the enlisted personnel quarters somewhere along the rear service road.)

The design did not turn verandas outward toward the city views (with the initial exception of the ward buildings' third-floor solaria in the original drawings, which the next drawings showed walled-in to provide third-floor bed space). Instead, the buildings faced onto cloistered courts, while their rear walls faced outward to give the public an impersonal visual effect. The compound resembled a penitentiary in that respect.

In summary, the original "As Projected" design for the hospital compound incorporated three primary groupings of buildings, segregated according to function, but unified by a single architectural style, a consistent use of materials, and a strongly axial plan reinforced by symmetry. The central compound--the actual working hospital--was a self-contained unit turned in upon itself around the three interior courts.

Although that original scheme was an ideal projection that was modified somewhat during subsequent design and construction to meet functional needs, the main grouping was realized to a remarkable degree, both in terms of general layout and architectural appearance, over eighteen years of construction. Once the basic concept had been set, the Bureau admitted little change in its execution. As the years went by, its continuity was reinforced by the officers who had personally overseen the original design of the hospital as they rose into higher positions in the Navy's Bureau of Yards and Docks.

Let us look into the sources of ideas for that original "Groups As Projected" drawing for the Hospital.

Sources in the History of Hospital Design

Hospitals as institutions for the care of the sick and wounded date at least as far back as Roman military hospitals. Their courtyard plans were not much different from the plans for principal hospitals in the Middle Ages housed in monasteries.

A new era in hospital design began in the nineteenth century based on new theoretical understandings of disease and on the efforts of Florence Nightingale. The idea that miasma (infectious vapor) of disease could be alleviated by exposure to clean, fresh air resulted in hospitals built as separate, free-standing pavilions of only one or two stories and usually connected by arcades or covered walkways.

The pavilion hospital flourished in the United States and continued to influence hospital design long after the scientific basis for this type had been discredited. Pasteur's and Lister's discoveries in the 1870s and the identification of bacteria rather than miasma as the source of disease introduced a new basis for hospital design by the first decade of the twentieth century. Sterilization, rather than access to fresh air, became the determining factor. This new understanding of the transmission of disease allowed a tighter grouping of wards and rooms and ushered in an era of high-density hospitals.

The pavilion form eventually gave way to the skyscraper in the late 1920s. But in the interim, more compact buildings (seen as more efficient) were the dominant type. These were often a taller two- to six-story cruciform of H-shaped buildings, affording all rooms sunlight, but in a more efficient way. In this transitional period, circulation, efficiency of operation, and management techniques began to have a greater influence on hospital design, and, following the nineteenth-century tendency to specialize hospitals by type, now each hospital tended to specialize by department (i.e., maternity, contagious diseases, surgery, etc.) on separate floors or in separate wings. Also, open wards allowing free air circulation in the pavilion hospitals gave way to smaller wards and private rooms.

Military hospitals played a central role in the history and development of hospitals as a building type and were similar to other hospitals in function

and appearance. Their major differences lie in the traditional military concern with security, in the strictly hierarchical nature of the military bureaucracy, and in the practice of housing personnel on the premises.

Military hospitals, like most military facilities, and unlike civilian hospitals, are typically isolated behind fences and entered via a gate house; separate areas segregate patients who are officers from patients who are enlisted personnel; and the grounds usually include auxiliary structures for housing the hospital staff. The higher status of officers within the military hierarchy is reflected in their individual detached houses or private rooms. Enlisted personnel are housed together in barracks. In the case of hospital wards, officers are typically placed with other officers in a private room while enlisted men are placed in an open ward with rows of beds, often in a separate building. The U.S. Naval Hospital design in San Diego incorporated all these considerations of security, hierarchy, and segregated housing.

The Naval Hospital in San Diego is transitional in type between the pavilion hospital and the later skyscraper hospital. Elevators make its buildings work, yet it does not strongly exemplify the dominant, high-density type of its period. Its unusual courtyard plan may derive from considerations of style or security and, despite its relationship to the early centuries of hospital design, is largely without contemporary models as a low-scaled courtyard plan. Few such pavilion hospitals appear to have been built with courtyard plans. The courtyard may have come from the Mission architectural style. As a two- to four-story courtyard complex with separate structures for auxiliary purposes, a predominance of open wards over small rooms, and an emphasis on natural ventilation, the San Diego Naval Hospital is closer in spirit, if not in actual appearance, to the older pavilion hospital type than to the later high-density type.

Sources in the Architectural Ideas of the Time

To understand the original significance of the architecture and planning of the Naval Hospital, it is necessary first to look at the larger development of which the hospital was a part, namely, the project to design and build four related architecturally important facilities in San Diego: the Marine Corps Advanced Base, the North Island Naval Air Station, the Naval Hospital, and the Naval Training Center. These four facilities were planned between 1918 and 1922 with a unified architectural expression--a simplified version of the Spanish Colonial Revival Style--and according to a common set of planning principles. They were planned in the Beaux Arts style.

The arrangement of all four facilities buildings into groups was based on the Ecole des Beaux Arts principles of symmetry, axiality, and ordered proportions that dominated many other large-scale planning efforts of the period. Like the city plans, civic centers, world's fairs, and institutional complexes built during the City Beautiful Movement, these four facilities could only be a product of the four decades after the 1893 World's Columbian Exposition in Chicago which introduced the Beaux Arts potential for unified planning.

The Beaux Arts approach was especially appropriate for the San Diego facilities because its design process was originally developed for and applied

to creating a series of government and military buildings. Yet the San Diego facilities were not exclusively products of the City Beautiful Movement and the teachings of the Ecole des Beaux Arts.

The California Mission Style

The simplified Spanish Colonial Revival style seemed an obvious complement to San Diego's Mission and Old Town, to the expanding body of Hispanic revival architecture in the city, and, in the case of the hospital especially, to the exposition buildings still standing nearby in the park.

The Spanish Colonial Revival was part of a movement in the late nineteenth century to revive interest in the regional architectures of the colonial period. In New England, for example, there was renewed interest in English Georgian architecture. In California, and to a lesser degree throughout the Southwest, the region's Spanish colonial architecture was rediscovered. In Southern California, particularly with regards to California missions, the revival was informed as much by a taste for the picturesque as by enthusiasm for the colonial past.

The Spanish Colonial Revival occured in two distinct yet overlapping phases. The first phase was the Mission Revival, extending from the mid-1890s to approximately 1915. The second phase, termed Spanish Colonial Revival or simply Mediterranean, flourished between 1915 and 1930.

The Mission Revival was part of a romantic fascination with the missions, which was exploited by the railroads and land promoters, particularly in Southern California during the hoom of the late 1880s and after. It also led to a mission preservation movement and to a serious appraisal by architects of the possibilities of incorporating elements of mission architecture into contemporary design. The original missions, built in the frontier of Alta California in the late eighteenth and early nineteenth centuries, were simplified versions of Renaissance-Baroque Hispanic churches, usually constructed of adobe brick with whitewashed walls. Common design elements included massive buttressed walls, low-pitched red-tiled gable roofs, curved and scalloped pediments, domed bell towers, round-arched arcaded corridors, and large patios with fountains or gardens. The Mission Revival was popularized by A. Page Brown's California Building--a pastiche of mission facades and arcades--at the 1893 World's Columbian Exposition. It reached its fullest development in the first decade of the twentieth century. The style was associated in particular with Southern California, where Mission Revival train stations, resort hotels, residences, schools, libraries, clubs, and churches conveyed a collective image both exotic and indigenous to visitor and resident alike.

The second phase of the Spanish Colonial Revival is actually more Mediterranean because it brings together architectural elements from Italy and Islamic North Africa as well as from Spain and Mexico. This latter phase tended to more carefully reproduce the historically inspired architectural elements, particularly in ornamentation. As popularized by Bertram Grosvenor Goodhue's buildings at the 1915 Panama-California Exposition, the style was characterized by large bare-wall surfaces punctuated with intense concentrations of ornamental detail. However, the spectrum of building style

types ranged from simple vernacular farmhouses to high-art cathedrals, and architects in the 1920s often produced designs with little or no ornament, characterized simply by stuccoed walls and red-tiled roofs. The growing influence of the modern movement, with its precept of abstract massing devoid of ornament, led some practitioners of the Spanish Colonial Revival style toward greater simplification. Goodhue's later simplified Spanish Colonial Revival, for example, represented his efforts to move beyond literal interpretation to achieve a more modern effect.

The Influence of Goodhue

The Navy's projects were all influenced by Bertram Grosvenor Goodhue, a highly individualistic and influential New England architect. Goodhue himself designed the Marine Corps Advanced Base, working in collaboration with Navy Bureau of Yards and Docks architects. San Diego had hired Goodhue to be chief architect of the Panama-California Exposition in Balboa Park. San Diego was so delighted by Goodhue's Exposition building designs that it required the Navy hire Goodhue as a consulting architect for the Marine Corps Base and Naval Air Station as a condition for receiving their gifts of city land.

Although the Bureau's architects had already drawn preliminary sketches of the San Diego facilities, when those sketches reached Secretary Daniels he vetoed their English Georgian style. "Tear them up," Daniels ordered, "and study the type of architecture that prevails in Southern California. It would be an architectural crime to adopt Newport or Norfolk architecture in Southern California." Bertram Goodhue and the Bureau began their collaborative design of the San Diego Marine Corps Base in 1917.

Goodhue was no longer a consultant to the Navy in 1919 when the Hospital was designed, but he influenced the planning and design of all four facilities including the Hospital through the power of his Panama-California Exposition complex in Balboa Park - especially the California Building - and his work on the Marine Corps Base.

Goodhue was an outspoken critic of the City Beautiful Movement, of the influence of the Ecole des Beaux Arts, and of the classical styles usually associated with them. Goodhue's distinctive solutions, rather than imposing order on the land, as he felt the City Beautiful Movement aspired to do, addressed the site's particularities and local history to produce a more appropriately tailored image.

While his San Diego work shared some overall characteristics with contemporary Beaux-Arts work, his courtyards with fountains, and other stylistic features derive also from his interest in the architectures of Mexico, Spain, and Persia, especially the Spanish Colonial architecture of Mexico about which he wrote a book. His overall intention was to not impose an ideal classical order, but to adapt carefully chosen elements into an indigenous local order. Goodhue popularized a new Spanish Colonial Revival architecture style at the Exposition which spread through much of the United States and became strongly identified with San Diego and other California cities such as Santa Barbara. He designed a number of houses and public buildings in Southern California and had a second home near Santa Barbara. In that sense, the New Englander Goodhue can be regarded a California architect.

Goodhue's Exposition style was more highly decorated than his later works. All four San Diego naval facilities, whether by Goodhue or not, display this more modern, simplified version of the Spanish Colonial Revival, with a minimum of literal Spanish details. The light plain stucco wall surfaces, the red tile roofs, the arcades, the courtyards and fountains of the Marine Corps Base, all suggest his earlier Hispanic architecture without the bombast. [2]

Precedents in Other Bureau Designs

The Hospital shared some basic architectural characteristics with other Bureau designs. The Bureau used the same structural system in San Diego it was using elsewhere - a reinforced concrete frame, the walls of which were infilled with hollow tile blocks. It was a reinforced concrete skeleton. Its block walls and gypsum slab roofs were light enough to allow such a slender frame. The Bureau had found these frames preferable to steel--cheaper and faster to build, and providing superior headroom, daylighting, and fireproofing. This structural system was best suited for industrial warehouse buildings, but it was put to nearly every use. (The concrete structural system is described in the HABS Outline Form concerning the Hospital's Administration Building.)

The Marine Corps Base and the Naval Air Station had already set a precedent for grouping standard Navy buildings in San Diego: a string of three narrow two- to three-story buildings abutting end to end, like boxcars

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[2]We examined the Bureau's correspondence with Goodhue and concluded that he no longer played a significant role in the Navy's design process by late 1919 when the Hospital was designed. Goodhue began working for the Navy in mid-1917 when, at the instigation of the San Diego Chamber of Commerce, the Bureau invited him to Washington to look at its preliminary layout sketches for the Marine Corps Base. There he agreed to become "consulting architect" for the Marine Corps Base. (The contract was a fixed fee plus expenses.)

As collaboration on the design for the Marine Corps Base progressed in 1918, the Bureau then also hired Goodhue to help design an Air Station for San Diego. But in the case of the Air Station, the Navy's officers and architects imposed so many changes upon Goodhue's ideas that he began to reconsider having his name associated with the Air Station's design. Goodhue was having serious problems with his health, the exchanges with Navy architects grew rancorous, the Bureau's Chief decided not to renew Goodhue's contract for the Air Station, and by early 1920 Goodhue was doing no more for the Navy than meeting his remaining obligations for the Marine Corps Base. It seems noteworthy that his name is not lettered on the drawings for the Naval Air Station.

For reasons for economy also, the Bureau did not approach Goodhue to design the Naval Training Station or the Naval Hospital. However, his influence on each is apparent. See Richard Oliver's book for an account of Goodhue's career.

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in a train. The middle building had the higher and more interesting roof (usually a tile hipped roof with an interesting ventilator along the ridge) flanked by the two less interesting flat-roofed buildings that gave the group a symmetrical effect. In the Hospital's original "As Proposed" drawing, the central building in the fancier western facade had the higher, more interesting Mission towers motif in the center, while the lower flanking buildings had those ventilators on their tiled hipped roofs.

The Hospital's solaria had precedents in Navy Hospitals all over the country. Its courtyards had precedents in the way the San Diego Marine Corps Base designers had placed buildings around an open square.

The closest precedent was the Naval Air Station's dispensary in 1919. Navy architect Huntington Barker's drawing shows a beautiful small hospital situated around an atrium court. The facade motif is the same high central section flanked by lower-roofed wings we see in the San Diego Naval Hospital. Internal functions such as wards, a dental office, and quarters for the Hospital Corpsmen, were all arranged around a Hispanic or Moorish central patio with arcades on one side and a collonade on the other, interconnected with covered walks. None of the dispensary's exquisite architectural detailing, such as the tiled octagonal fountain or the scrolled capitals on the columns, however, came to be included in the larger Naval Hospital in Balboa Park.

Drawings and photographs of architectural precedents at the Marine Corps Base, the Naval Training Station, and the Exposition are provided in the Field Records section of this report, identified as photographs 004 through 011.

Credits for Designing the Hospital

That first sketch of the Naval Hospital was in the Beaux Arts manner of beginning with a bloc of uniform buildings to later be drawn out individually and in more detail. A sketch of that kind served the Navy's immediate purpose of courting San Diegans for the Balboa Park site donation. Later, the Bureau would assign its individual architects to design the separate buildings within those facades and cornice lines. Finally, staff specialists would make the final drawings of floor plans, mechanicals, and decoration.

The first sketch of the Hospital group was sent to San Diego April 1920 by the Navy project manager having overall responsibility for its design and construction, Frederick Southworth. Southworth was the Bureau of Yards and Docks project manager who specialized in hospital projects and worked with all the major figures in the Navy's design program. He had been wartime Chairman of the Bureau's Architectural Review Committee, together with Fenton, Hiss, and Partridge. In 1918 Bertrand Goodhue mentioned having designed the San Diego Marine Corps Base dispensary in accord with "the drawing prepared by Mr.

Southworth." It is nevertheless unlikely that Southworth himself personally designed much of the San Diego Naval Hospital because he was too busy supervising the architects who designed it. [3]

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[3]Frederick Southworth began his Navy architectural career as a construction manager and eventually became the chief administrator (Chief Architect) for all Navy designs.

Born in Massachusetts in 1874, Southworth graduated from MIT in architectural engineering in 1900 and began designing and supervising construction for private Massachusetts architects. After Southworth had four years of civilian experience, the head of the U.S. Naval Academy appointed him inspector of construction for six Academy buildings in 1904. In 1907 the Navy Surgeon General requested Southworth be transferred to the Bureau of Medicine and Surgery to supervise hospital construction in Washington D.C., but the Chief of the Bureau of Yards and Docks requested that Southworth be transferred instead to the Washington Navy Yard as an architectural draftsman in charge of all hospital plans and specifications then being prepared by the Bureau of Yards and Docks for the Bureau of Medicine and Surgery.

In 1907 Southworth began a career that required constant travel for hospital site selection, contract management, and construction inspection. He lived in Washington D.C. only two years, 1930 and 1937, until his retirement in 1944. He was a career civilian employee, a member of the American Institute of Architects, and during World War I changed pay status to Naval Reserve Force Commander while still working in the same Navy job.

A 1909 recommendation for promotion noted he had designed a standard floor plan for Navy hospitals that featured economical construction and adaption to changing needs and to future extension. It also stated that the exactness of Southworth's blueprints and written structural specifications were superior in clarity to those of private architects and so brought the Navy lower construction bids. In 1912 he managed construction of the D.C. Navy hospital. He wrote the hospital portion of the Bureau's account of its World War I accomplishments, and in 1922 was detailed to assist the Veteran's Bureau.

During the 1920s he was the "special consultant to the Navy's Bureau of Medicine and Surgery and in charge of all design and construction projects and contracts for hospital and subsidiary buildings for that Bureau, including dispensary buildings for all yards and stations." He designed the first multi-story Navy hospital (Philadelphia) and the largest Naval Medical Center (Bethesda).

Within the Bureau of Yards and Docks Southworth served as Chairman for the Committee on Design and as Federal Specifications Board representative. He was responsible for a wide range of building types. He eventually was named Chief Architect in charge of the Bureau's program during World War II. He retired in late 1944 to begin consulting work in Washington D.C.

Today we know the buildings' designers only by their initials on the architectural drawings. Their relative anonymity has given rise to some confusion over authorship of the Hospital. The January 1, 1920, San Diego Union claimed the forthcoming "buildings for the magnificent San Diego naval hospital were designed by Bertram Goodhue, famous New York architect," while allowing that the "plans and specifications were drawn under the supervision of Commander F. W. Southworth, project manager of hospitals, Bureau and Yards and Docks." On June 3 the Union published the first bird's-eye sketch and stated more accurately that "the drawing was made by architects of the Bureau of Yards and Docks." In the 1930s the Hospital's commanding officer claimed, "it becomes difficult to find a name to which we can attach more responsibility for the planning" of the Hospital than Rear Admiral Edward R. Stitt who, as Surgeon General of the Bureau of Medicine and Surgery, had intense interest "in the inception and development of the San Diego Hospital... and followed every detail of it with closest attention." But Navy architect Lincoln Rogers told the Union on March 22, 1923, that the hospital had been designed by the Bureau of Yards and Docks in Washington D.C. while he was on other duties there, and he claimed no credit for himself.

Each building must be attributed to a separate architect, and in many cases a single building must be attributed to several architects, all of whom were working simultaneously in the Bureau's drafting rooms in the 1920s.

The original bird's-eye sketch for the Hospital group does not carry a name, but it was likely drawn by the same designer who did the Administration Building. The Administration Building's elevation and the Hospital group plot plan were both signed "W. P.", probably William Partridge. This attribution of the overall hospital design to Partridge is appropriate in view of his deep Beaux Arts background, his well-known facility for beautiful perspective drawings capable of swaying public opinion, and his position as an architect on the Bureau's review committee that had been charged with providing a Mission-style design for San Diego. Partridge was the Bureau's go-between for disputed architectural situations [4].

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[4]William T. Partridge's career illustrates how deeply an architect could become involved in public buildings and public planning.

Born in 1866 in the District of Columbia, Partridge apprenticed to an architect after grammar school. In 1883 he enrolled in Columbia University to read classics and take some architectural courses. Partridge later won travelling scholarships to measure and draw ancient Italian and French buildings and then returned to teach "free use of classical orders" at Columbia. His first work was for a Boston architectural services firm that supplied drawings to architectural firms, including perspective drawings for Charles Follen McKim's proposals for the Boston Public Library competition and perspectives for John Galen Howard in several competitions, including Stanford University.

Partridge moved back to Washington D.C. in 1901 to be McKim's assistant on the McMillan Park Commission, to be personally in charge of perspective drawings and tabletop models for replanning of Washington D.C. By 1917 Partridge had laid out 40 perspective drawings for Guerin and made a model of

the city in miniature to solve problems in site designs for the Municipal Center, the National Gallery of Art, and the Jefferson Memorial. He analyzed the origins of the city's original L'Enfant plan to learn in what historically consistent ways that plan might be extended.

From 1918 to 1927 Partridge then worked for the Navy's Bureau of Yards and Docks. He instilled aesthetic awareness in its operations by helping establish an Architectural Review Committee, by bringing architects into the initial design phase of engineering projects, and by teaching incoming engineer officers about the application of basic architectural and aesthetic principles to engineering design. In his resume, Partridge stated that he had been consulting architect for a naval hospital, but he does not say which hospital.

It appears that in his position on the Architectural Review Committee and with his earlier ties to the McMillan Commission, Partridge served as the Navy's go-between when the Navy needed a plan approval from either the Federal Fine Arts Commission or the National Capitol Planning Commission.

Partridge left the Bureau in 1928 to work for the National Capitol Park and Planning Commission. His perspective drawings for the Commission's 1928 report stressed historical continuity with the original plan. He helped Secretary Mellon prepare a film concerning redevelopment of the Triangle area. He formulated extensions of the city's plans for: the Northwest Rectangle (the Interior, War, and Navy Department buildings), the Southwest Area (Social Security, Railroad Retirement, and Census Bureau buildings), the Municipal center, the Watergate Underpass near the Lincoln Memorial, the Museum of Natural History extension, and East Capitol Street. He retired from the Commission in 1955 at the age of 85.

Partridge's talent for designing buildings is not clear. He won recognition for working through committees and commissions to win acceptance for other architects' designs. The American Institute of Architects thanked him for helping architects to "regain their foothold in the development of the National Capitol. . . and to participate in its expansion" and for keeping architects involved in the city's planning process that would otherwise have fallen to engineers or landscape designers. The Institute lauded him in 1939 for city planning techniques, i.e., his "facility in perspective and model making which has helped planners to reshape many projects and clarify undertakings with the public." Again, in 1955, the Institute recounted his "phenomenal" facility with perspective drawings and stated that "his models have carried conviction in many a planning crisis."

Partridge documents are in the American Institute of Architects library, Washington D.C.

W. P. designed the Hospital Administration Building's exterior while H.C.S. designed its floor plans and A.E.F. and J.H.R. drew its foundation and concrete framing plans. A year later, M.S.M., who designed the Hospital's Power House, was assigned to revise W. P.'s original drawings for the Administration Building's exterior.

The Operating Building was designed by G.P.H., probably George P. Hales, the Bureau architect who had been stationed in Bertram Goodhue's New York office in 1917 to collaborate designing the Marine Corps Base. (G.H.P. also drew the Naval Training Station plot plan.) The Operating Building, with its two dramatic skylit surgery rooms, is the most functionally expressive of all the Hospital buildings. (The Administration Building, on the other hand, although looking something like a cathedral, has no central nave or bells in its towers to carry out the function that the exterior expresses.) G.P.H. was assisted in the Operating Building's design by F.W.S., probably Frederick W. Southworth, whom we know to have been a hospital specialist.

We have not found names to fit many of the initials on the drawings for the other buildings. All the drawings and initials are listed in Appendix B.

The individual designer's assignments to work on San Diego buildings as they came along gave the four major facilities a continuity of design. William Partridge worked on the Naval Air Station's Bachelor Officers Quarters before he drew the Hospital's Administration Building and two ward buildings. Both Southworth and Hales worked on the Marine Corps Base before they designed the Hospital's Operating Building. K.W.H. worked on the Air Station Administration Building before drawing the Hospital Subsistence Building. Huot and Menzies worked on the Marine Corps barracks designs before Huot drew a Hospital site map in 1919 and Menzies drew the Training Station's Officers Quarters in 1922 and the Hospital Laboratory Building and North Ward Building in 1924. That interchangeability of designers from one of the San Diego programs to another gave the four facilities slight architectural variations without allowing the distinct identity of one particular architectural team to emerge in one particular facility.

The Hospital as Part of the Navy's San Diego Architectural Program

The four important San Diego military facilities shared certain planning and architectural themes: the influence of Bertram Goodhue's Exposition designs in the arcaded courts and restrained Spanish Colonial Revival styling; the symmetry and axiality of the pervasive Beaux-Arts principles of the era; and the local fashion for Spanish Revival architecture, which the Navy had taken for its own.

On one hand, the Hospital was a uniform product of the same repetitive Navy architectural program as the other facilities. On the other hand, the Hospital did not share their more robust and elaborate construction. The other three facilities' porticos had stout columns and arcades running across open spaces from building to the other, while the Hospital's roofed walkways had only thin columns and did not go beyond the length of the buildings. The other three facilities were elaborated with literal Spanish details such as spindle grilles, timber balconies, iron railings, and tile inserts. The Hospital, aside from its Administration Building, was but sparsely decorated,

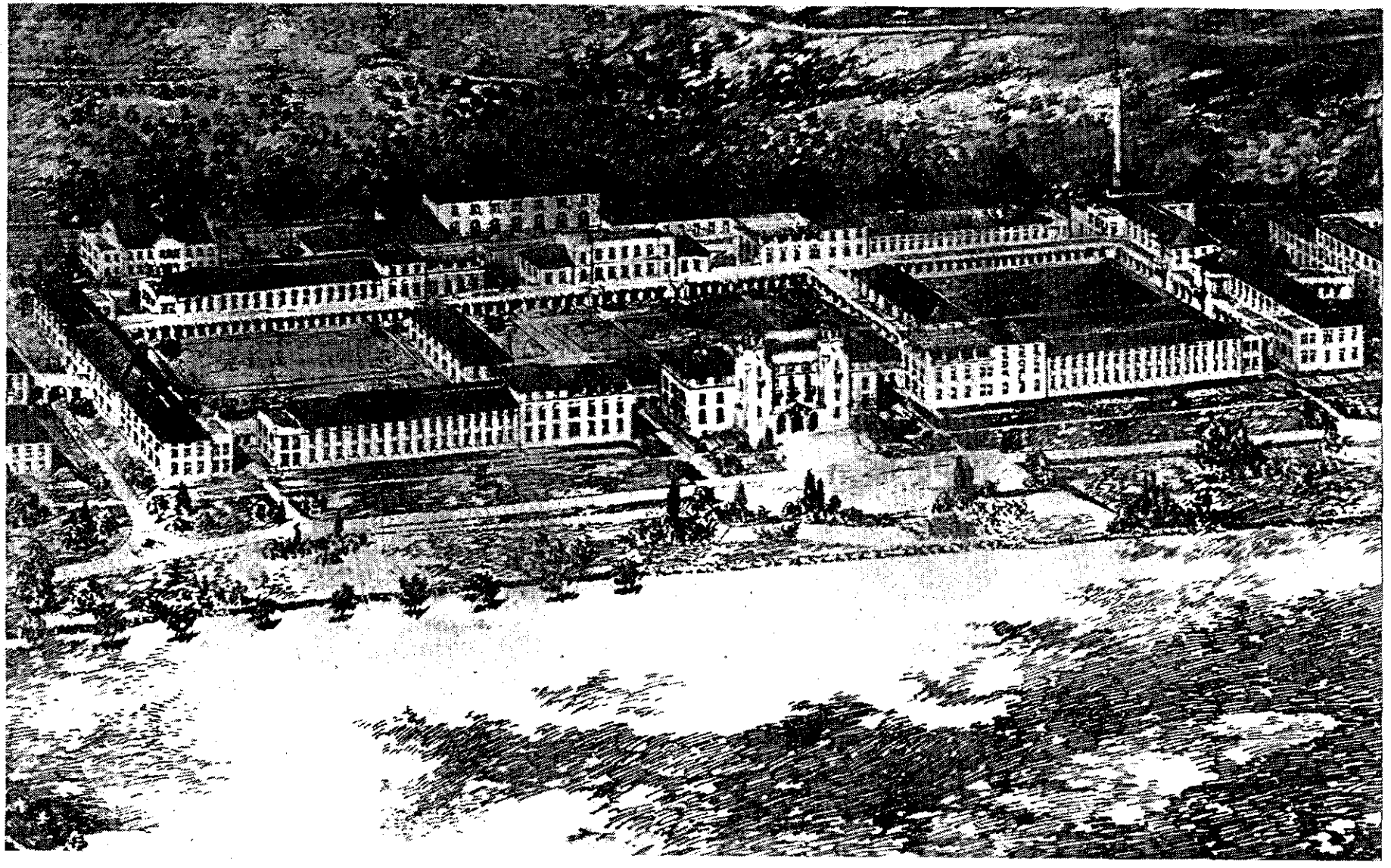
and then with subdued Hispanic details. The Hospital was the most slender and austere of the four facilities.

At first we might suspect that the Navy's design program had gone through the same chronological sequence as Gebhard had described for the Mission style. The first phase, as might be represented by the Marine Corps Base, had more massive Mission proportions with strong Spanish details. The later phase, as might be represented by the Hospital, had more refined Mediterranean proportions with finely detailed, eclectic ornamentation.

But when we look into the origins of the plans we learn that the Bureau had begun drawing plans for the San Diego buildings before the negotiations for the city's land donations had been concluded, and that Secretary Daniels had rejected the Bureau's first plans because they were not "in keeping with the Spanish architecture of Southern California and Mexico". (Those drawings were probably in an English Georgian classical revival style. Daniels said they were more appropriate to Newport, Rhode Island, or Norfolk, Virigina.) Though Daniels ordered Bureau architects to "study the type of architecture that prevails in Southern California", and to begin designs anew, it is reasonable to assume that the architects carried the same basic ideas of building arrangements and floor plans forward from their early East Coast style drawings to their Southern California style drawings. The eastern influences were especially strong in the Hospital designed entirely in Washington. Its Spanish influences were more superficial than the others'.

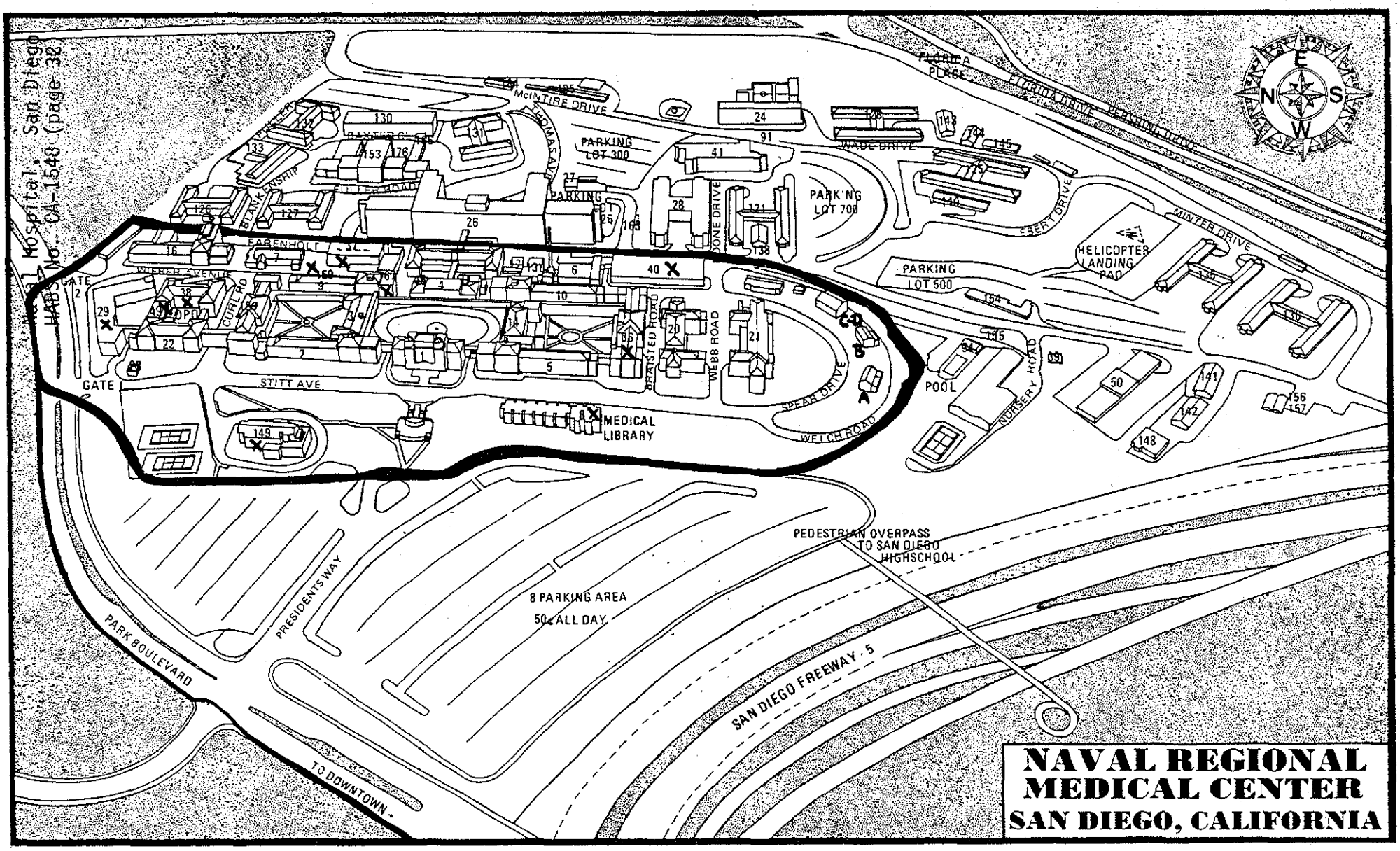
Thus it is probably better to see the four major Navy projects in a continuum that runs from the most local and original in styling at one end to the most bureaucratically repetitive and Eastern at the other. The Marine Corps Base is the most local and seminal concept, and it retains its spatial grandeur to the present. The Naval Air Station was as grand and nearly as original in its day, but has lost its spatial effects to intruding construction. The Training Station was less original than the earlier two and was designed by a Bureau team dispatched from the East. Finally, the Hospital's cloistered and slightly cramped utilitarian styling was designed completely on the East Coast.

Though the Navy's Mission Style now seems indigenous to Southern California, it was produced by Eastern-bred designers striving for an appropriately local and picturesque effect. The Bureau was using that local style, at the orders of the Secretary of the Navy, to accomplish a political purpose.



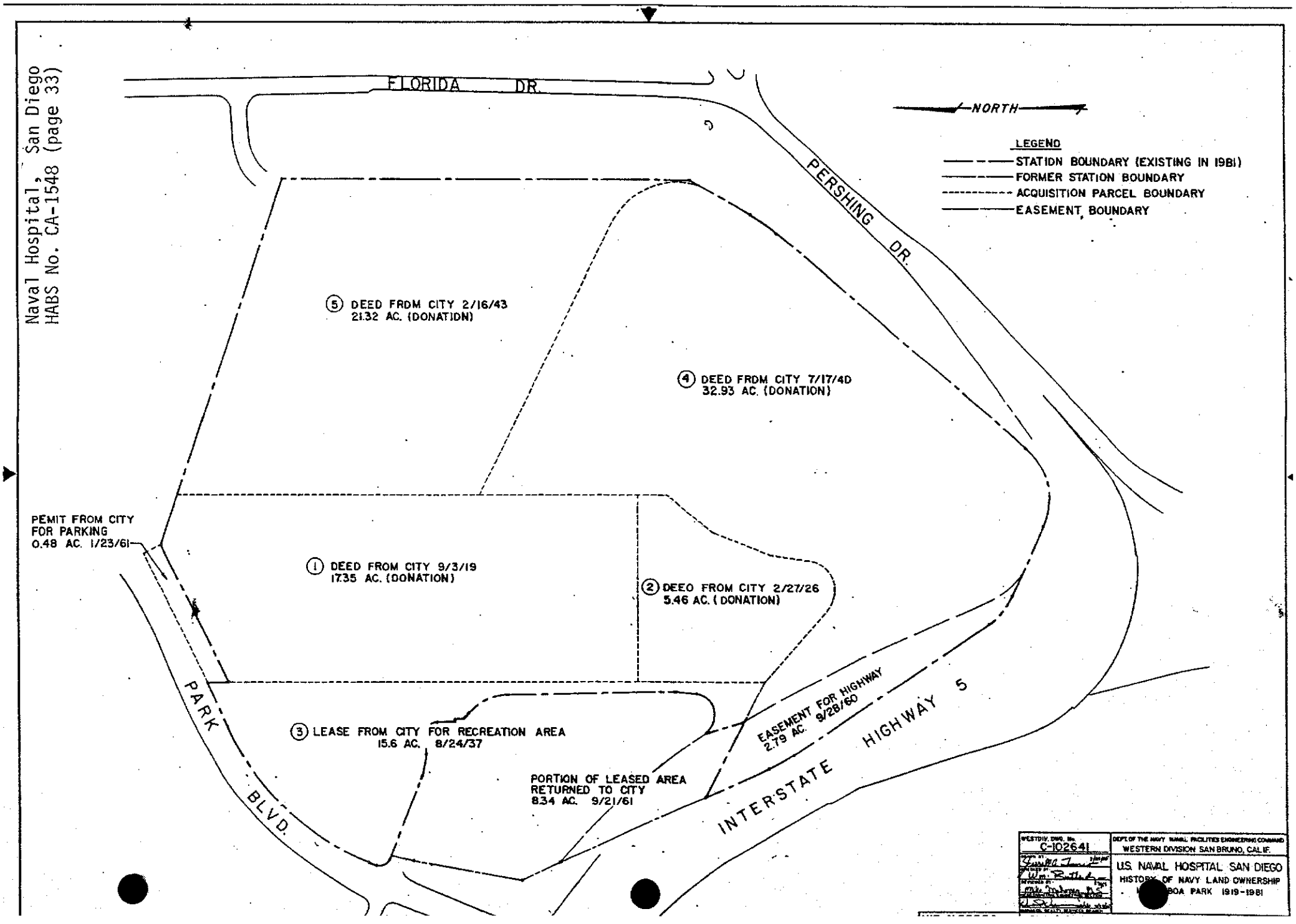
GROUPS AS PROJECTED
DESIGN FOR U.S. NAVAL HOSPITAL, SAN DIEGO,
(VIEW FROM WEST)
BY U.S.NAVY BUREAU OF YARDS AND DOCKS, 1920.

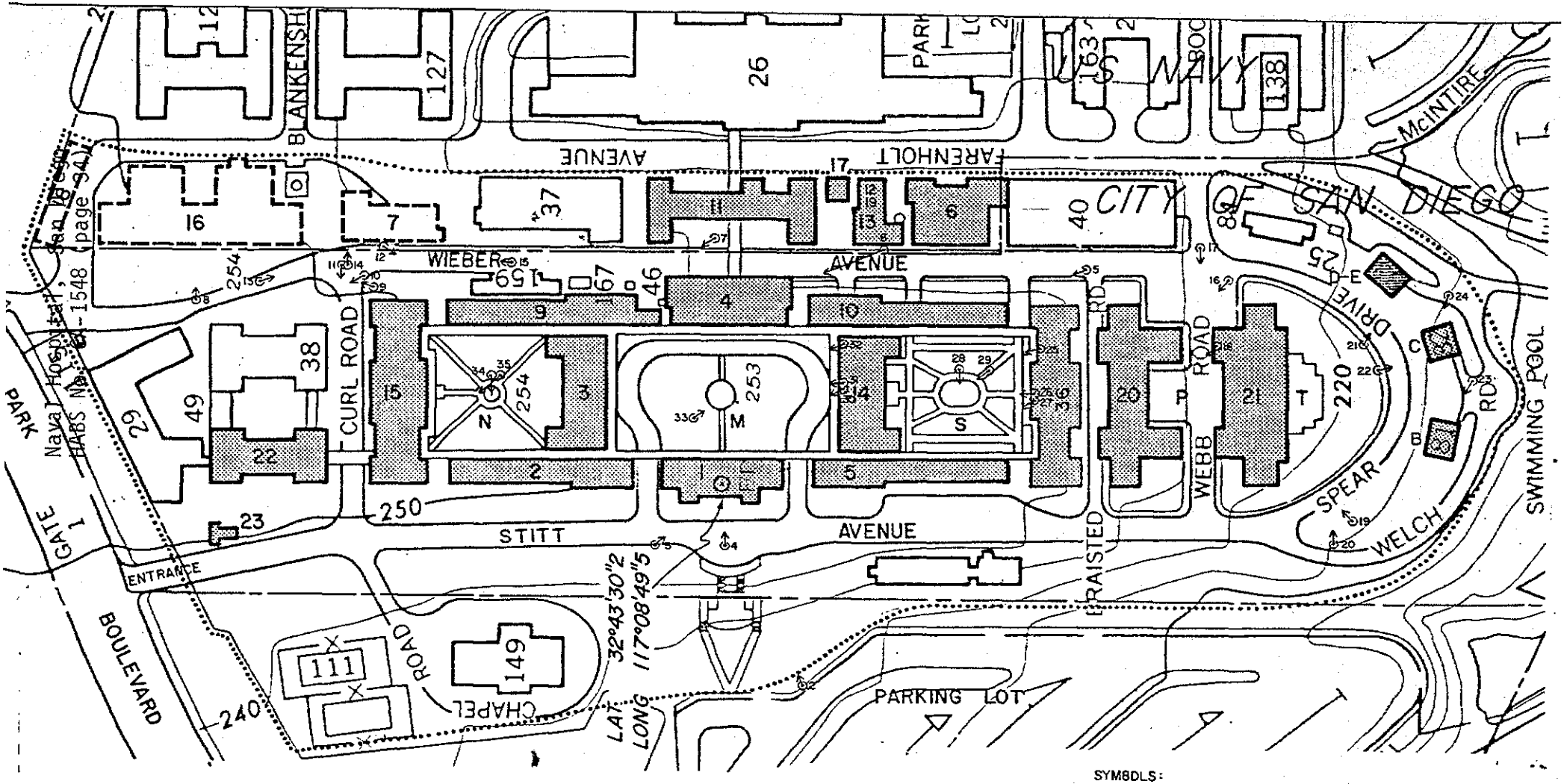
(This drawing is reproduced full width in the Field Records photographs numbers 004 and 005.)



BOUNDARY OF HISTORIC DISTRICT
from "Report on the Architectural/ Historical significance of the U.S. Naval Hospital, Balboa Park, San Diego"
by Sally B. Woodbridge, January 1981

Naval Hospital, San Diego
HABS No. CA-1548 (page 33)





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N. NORTH QUADRANGLE
P. PLAZA COURTYARD (PAVED 1928)
S. SOUTH PATIO
T. TERRACE, 1928

SYMBOLS:

- HISTORIC DISTRICT BOUNDARY BY WOODBRIDGE
- LAND EXCHANGE BOUNDARY
- CONTRIBUTING STRUCTURE
- LATER BUILDING
- CONTRIBUTING STRUCTURE (DEMOLISHED)
- G→ PHOTO POINT IN WOODBRIDGE REPORT

WESTDIV, DWG. NO. A-102339	DEPT. OF THE NAVY NAVAL FACILITIES ENGINEERING COMMAND WESTERN DIVISION, SAN BRUNO, CALIF.
COMPILED BY: Wm. RUTLEDGE	U.S. NAVAL HOSPITAL SAN DIEGO
DRAWN BY: V.A. TOMEO	HISTORIC DISTRICT RECORD MAP
CHECKED BY:	
REVIEWED BY:	
HEAD, CADASTRAL SECTION	
APPROVED BY:	
MANAGER, REALTY SERVICES BRANCH	
UIC-N 68056	NAVFAC DWG. NO.
DIRECTOR, REAL ESTATE DIVISION FOR COMMANDER, NAVFAC	SCALE: 1" = 100' (APPROX.) SHEET 1 OF 1

WARD A (BLDG 2)

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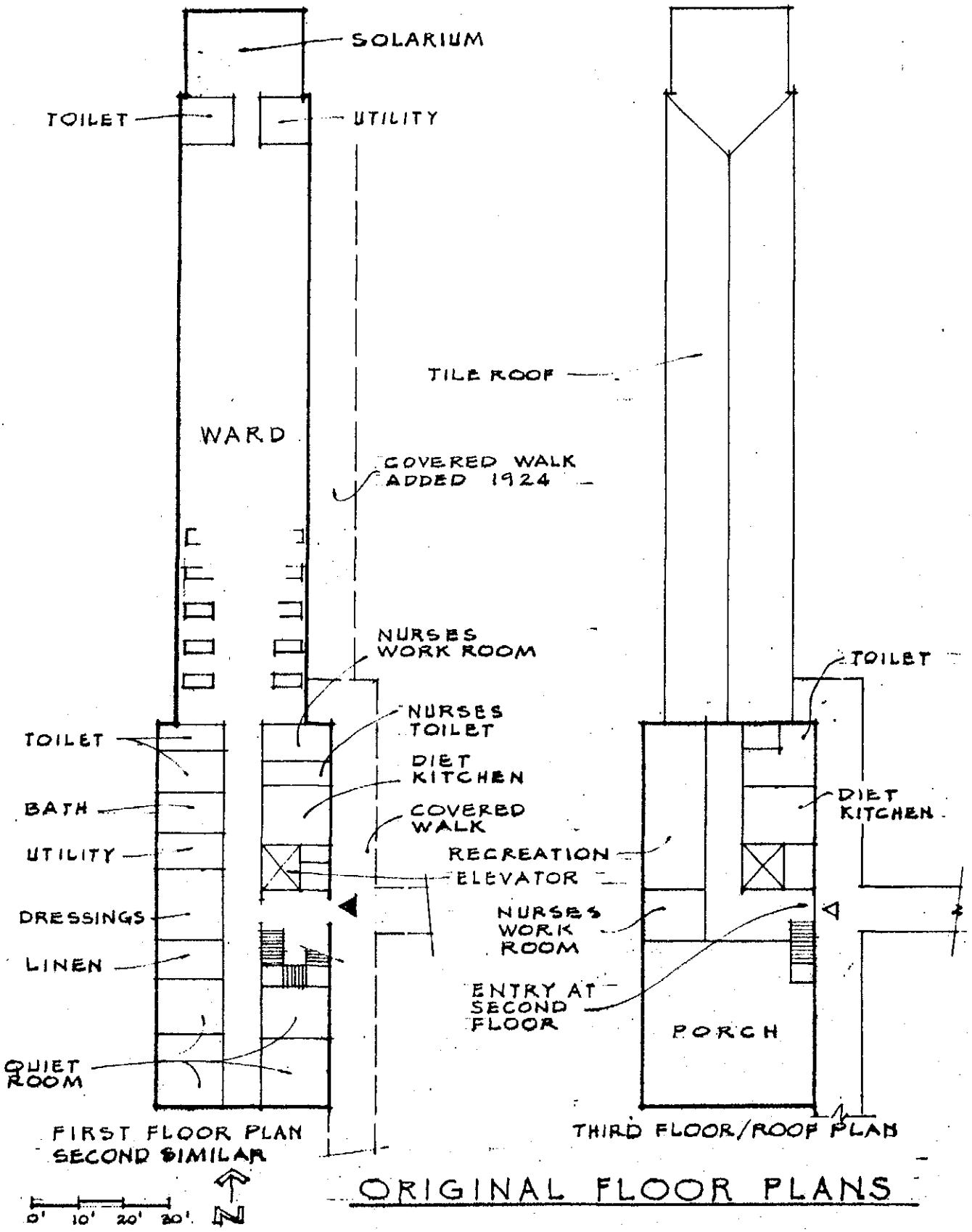
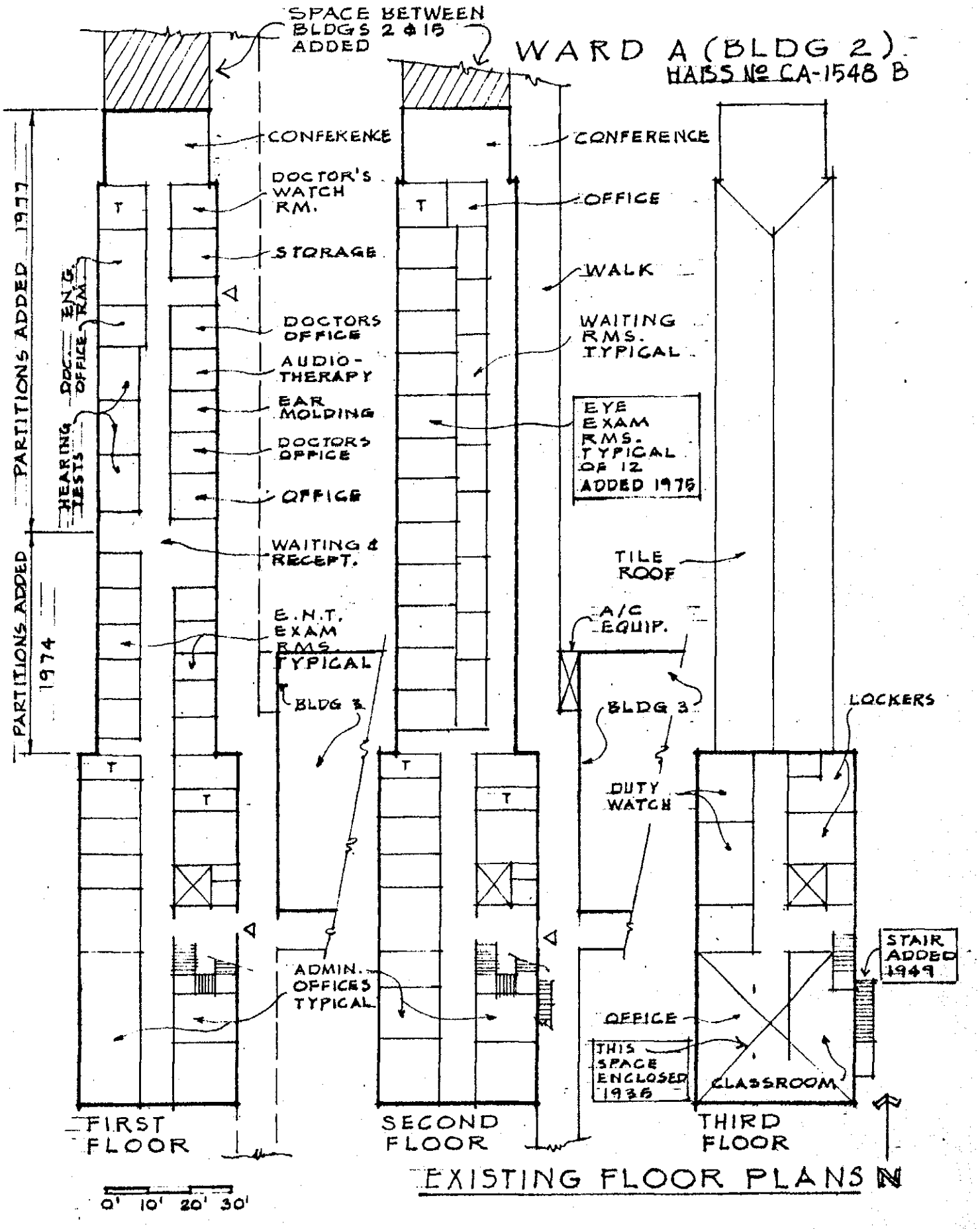
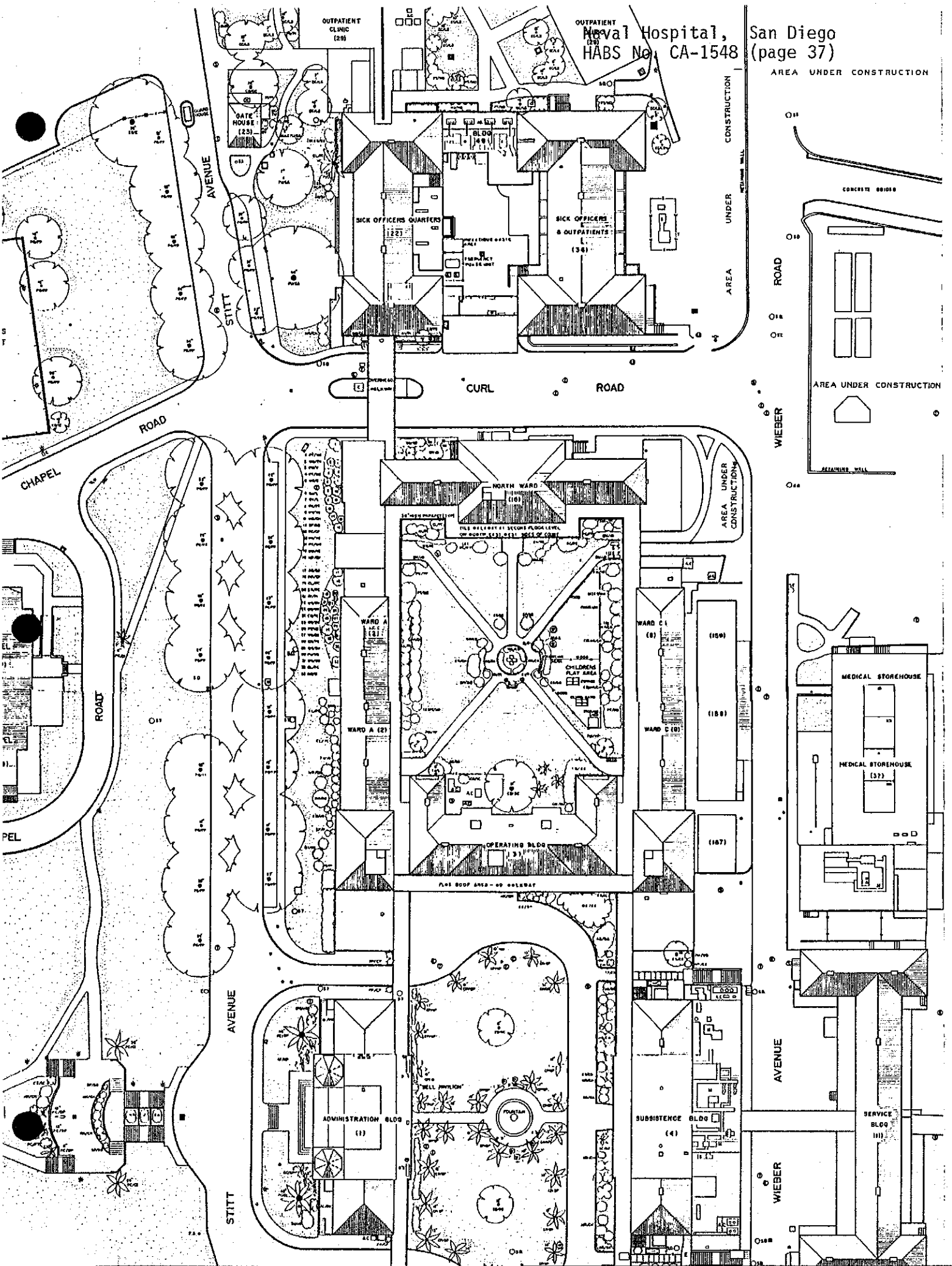
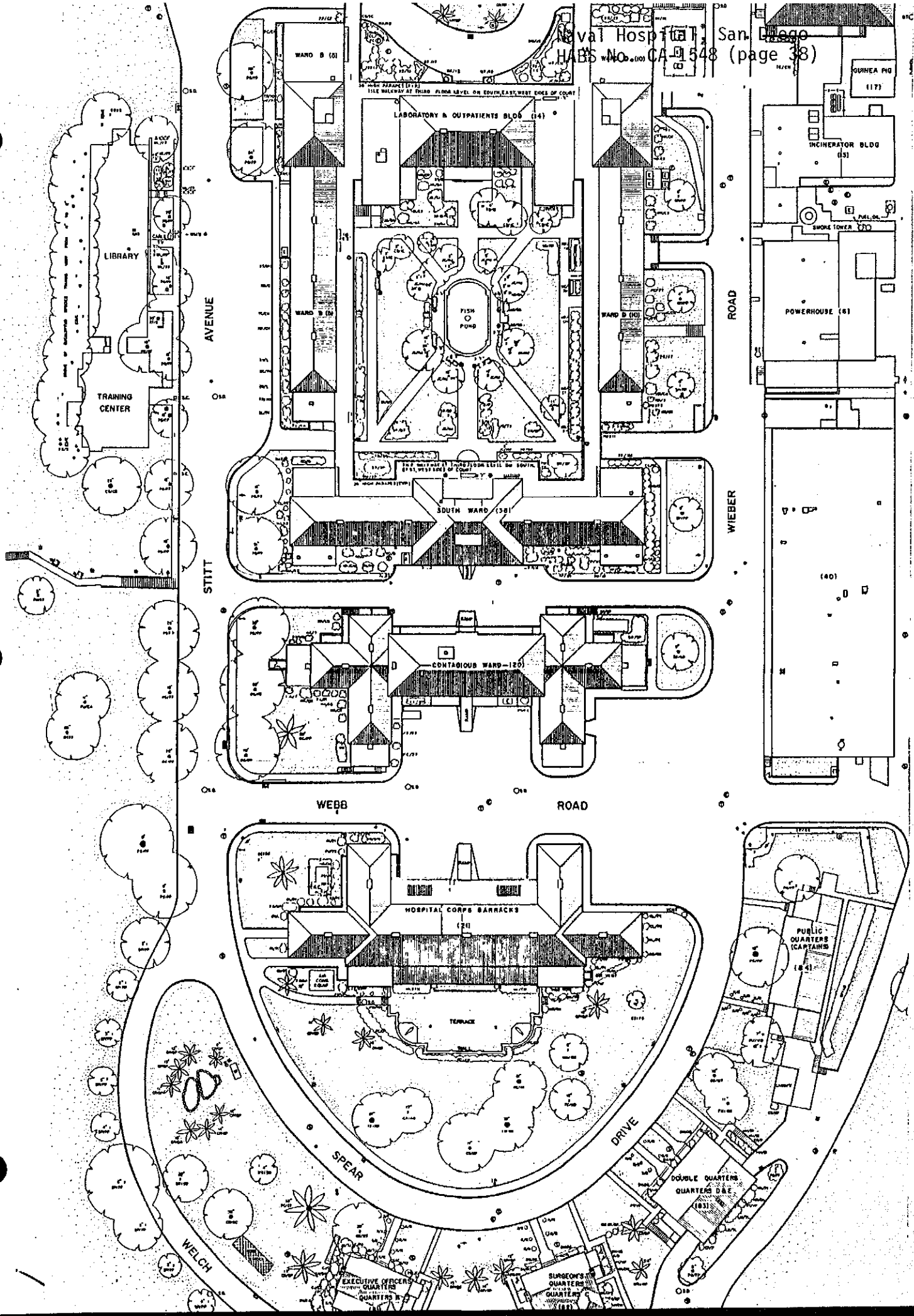


ORIGINAL FLOOR PLANS


WARD A (BLDG 2)
HABS No CA-1548 B
SPACE BETWEEN BLDGS 2 & 15 ADDED
CONFEKENCE
CONFERENCE
DOCTOR'S WATCH RM.
OFFICE
STORAGE
WALK
DOCTORS OFFICE
WAITING RMS. TYPICAL
AUDIO-THERAPY
EAR MOLDING
EYE EXAM RMS. TYPICAL OF 12 ADDED 1975
DOCTORS OFFICE
OFFICE
WAITING & RECEPT.
TILE ROOF
A/C EQUIP.
E.N.T. EXAM RMS. TYPICAL
BLDG 3
LOCKERS
DUTY WATCH
ADMIN. OFFICES TYPICAL
STAIR ADDED 1949
OFFICE
THIS SPACE ENCLOSED 1936
CLASSROOM
PARTITIONS ADDED 1977
PARTITIONS ADDED 1974
HEARING TESTS
DOC. OFFICE
E.N.T. RM.
FIRST FLOOR
SECOND FLOOR
THIRD FLOOR
0' 10' 20' 30'
EXISTING FLOOR PLANS
N

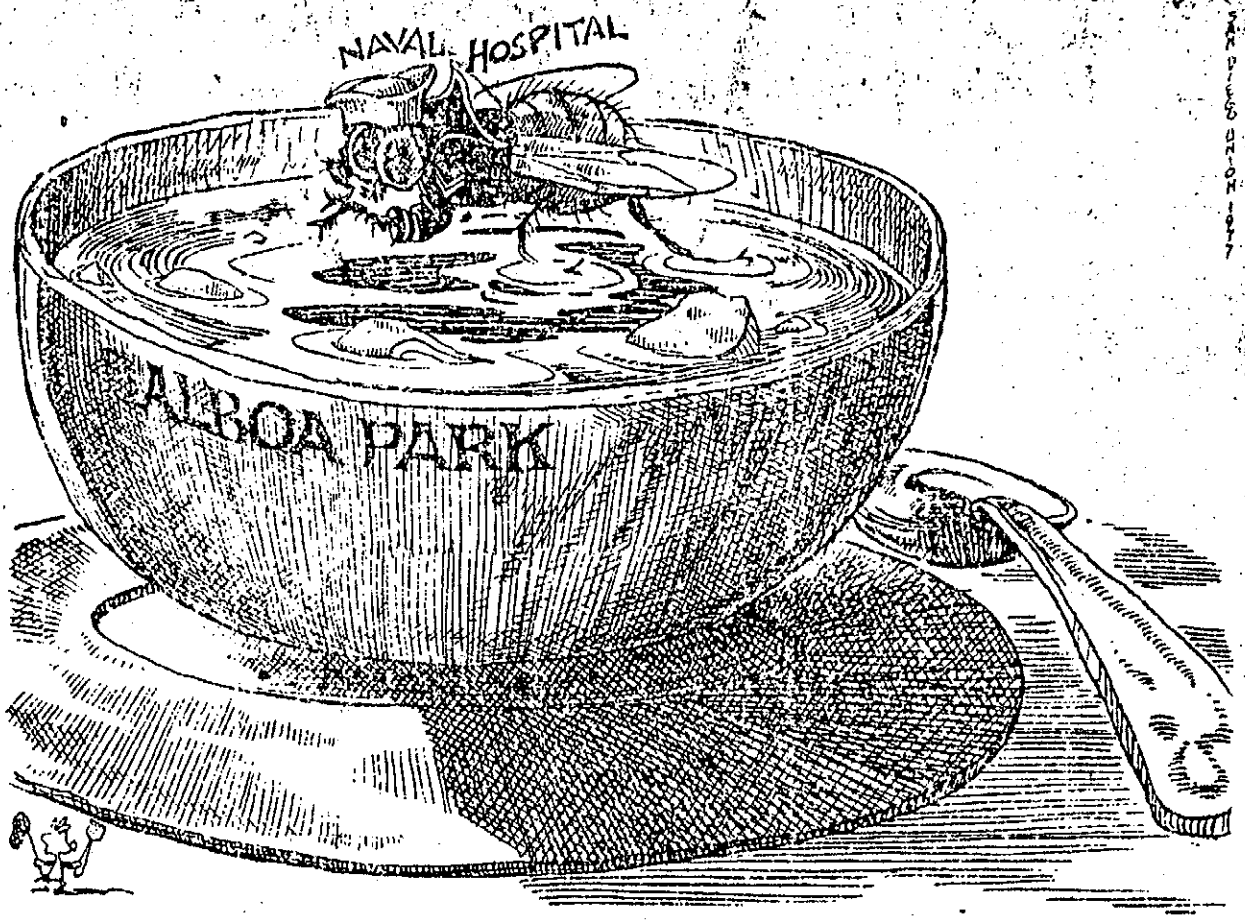

OUTPATIENT CLINIC (29)
OUTPATIENT (29)
AREA UNDER CONSTRUCTION
GATE HOUSE (23)
BLDG (49)
SICK OFFICERS QUARTERS (22)
SICK OFFICERS & OUTPATIENTS (36)
AVENUE
STITT
AREA UNDER CONSTRUCTION
CONCRETE BRIDGE
ROAD
AREA UNDER CONSTRUCTION
CURL
ROAD
WIEBER
CHAPEL
ROAD
NORTH WARD (10)
AREA UNDER CONSTRUCTION
WARD A (2)
WARD C (8)
(150)
(188)
CHILDRENS PLAY AREA
MEDICAL STOREHOUSE
MEDICAL STOREHOUSE (37)
OPERATING BLDG (3)
(187)
FLAT ROOF AREA - NO RAILWAY
AVENUE
ADMINISTRATION BLDG (1)
SUBSISTENCE BLDG (4)
SERVICE BLDG (11)
AVENUE
STITT
WIEBER

Naval Hospital, San Diego
HABS No. CA-1548 (page 38)



Pass to Cdr. George, Plans

Naval Hospital, San Diego
HABS No. CA-1548 (page 39 of 80)



SAN DIEGO UNION 1977

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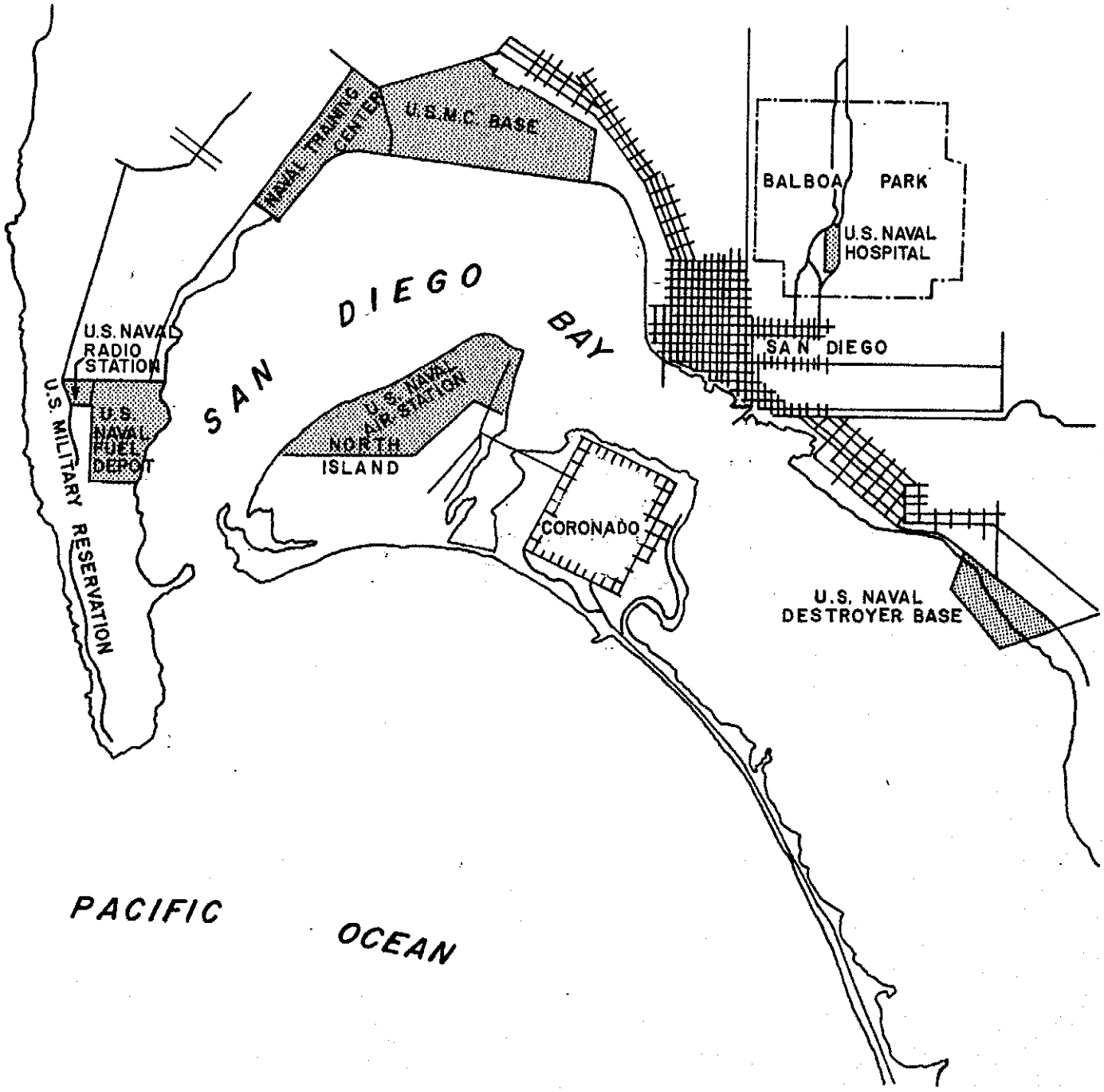
NAVAL TRAINING CENTER
U.S.M.C. BASE
BALBOA PARK
U.S. NAVAL HOSPITAL
SAN DIEGO
U.S. NAVAL RADIO STATION
U.S. NAVAL FUEL DEPOT
U.S. MILITARY RESERVATION
SAN DIEGO BAY
U.S. NAVAL AIR STATION NORTH ISLAND
CORONADO
U.S. NAVAL DESTROYER BASE
PACIFIC OCEAN

CHAPTER 3: BUILDING THE HOSPITAL

The Navy followed its original 1920 design over the next eighteen years of construction with few modifications. Once the concept had been set, the Navy admitted little change in the hospital's basic layout and architectural appearance, yet all the while fostered a constant evolution of hospital functions within that unchanging shell.

The Bureau of Yards and Docks [1]

The Navy's Bureau of Yards and Docks was responsible for new facilities for the entire Naval establishment. It designed each new building (or hired a consultant to design it), drew up blueprints, put working drawings out for private construction firms to bid on, and supervised construction. The Bureau of Yards and Docks was made up of civil service employees (engineers, architects, draftsmen, clerks) directed by Navy officers. Thus when we speak of the Navy as having built a building, we are speaking of its design by civil service employees and its construction by private construction firms, all on behalf of the Navy.

The Bureau Chief was a career military officer while the officers directing the civilians under them were recruited from civilian engineering practice [2]. These engineer and architect officers were called the Navy's Civil Engineer Corps (CEC) and the Bureau Chief was the head of that corps.

The Bureau Chief kept his civilian staff under tight control by not allowing them to speak for the Bureau. Only the Chief and his highest ranking assistants could sign the outgoing letters that conveyed design and management instructions to contractors and the Bureau's construction managers. Every sheet of drawings needed the signature of the top officers of the Bureau, including the Bureau Chief, before it could go to a contractor.

Written correspondence constituted virtually all the Bureau's communication with its project managers in the field. Personal visits and telephone calls played an insignificant role. The Bureau required a monthly photograph of progress of each construction project. Those reports and photos, preserved in the Bureau's archives, give us a first-hand view of every building the Navy built.

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[1]The archives of the Bureau of Yards and Docks are kept by the Command Historian of the Naval Facilities Engineering Command, Port Hueneme, California.

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[2]Applicants for the Bureau's five-day written examination were men 22 to 30 years old with 20 months of professional experience beyond their civil engineering degrees. Top scoring applicants were commissioned in Navy at officers pay levels and were addressed as Civil Engineer rather than by military rank. After 1918 all commissioned officers were thenceforth addressed as Lieutenant, Commander, and so on.

The Naval Academy did not have an engineering school at the start of the century. In 1906 the Navy began preparing career officers to take control of the Bureau of Yards and Docks by sending two Academy graduates to three-year engineering programs. The first of those officers entered the Bureau in 1909.

Sense of Architectural Mission

The Bureau's architects, like other architects of the era, had been bred to traditional masonry buildings. They had a notion of "permanence" in their architectural goals. That sense of architectural mission was expressed in 1913 when they created a Board of Design. In 1923 the Bureau's Architectural Review Committee described its purpose this way:

> "Architecturally appropriate designs [are] to be used for buildings and structures. In order that buildings and structures of all kinds designed or built under the cognizance of the Bureau may be pleasing in appearance, as well as serve the particular utility for which intended, the Bureau has established the Architectural Committee as a consulting section apart from the Design Division. It is the intention of the Bureau that designs shall be appropriate from the architectural standpoint without interference in the function or utility of the building or structure. The Bureau's experience has shown that these objects may often be accomplished at no increase in cost, and frequently with a saving in expense. The designs shall preferably be plain and dignified, with the minimum of ornamentation and free from ostentation."

The Committee worked to instill this aesthetic sensibility into incoming engineer officers through lectures introducing them to the basic principles of architectural design. Their concern for buildings merged into a Beaux Arts concern for groups of buildings, and for what we would call urban design and city planning today. (A Bureau Planning Board concerned itself with standardizing plans for new Navy bases.) The Architectural Review Committee thus provided a general sense of aesthetic purpose and brought about the harmonious effects we see in the Navy bases of the 1920s.

Construction Managers: The Navy's Civil Engineer Corps

After the Bureau put its drawings out for bid, its officers supervised the firm that won the construction contract. The Civil Engineer Corps (CEC) had the responsibility for supervising construction. Some CEC officers spent their careers in the field, supervising one construction project after another.

As we have seen, the Navy civil engineers were a separate occupational group, analogous to medical officers in the Navy Medical Corps. Its members were not "officers of the line" trained at the Naval Academy for commanding ships, but rather civilians who had been educated as civil engineers and had begun their work in civilian jobs outside the Navy, only later in life to enter the Navy's engineering corps. In their backgrounds they resembled the civilians who enter the service at mid-career in wartime and then stay in the military after the war.

In 1912, by posting a CEC officer at each Naval Station to be responsible for all utilities, the Bureau became a nationwide organization. The CEC officer who operated the base utilities served as the Bureau's representative there, conveyed the base commander's wishes for new construction up to the Bureau, and supervised Bureau construction projects in that locality. (The Bureau held all design and contracting authority in its Washington office.)

The Program for San Diego

In October 1917 the Bureau sent CEC Officer Leonard Cox from the Twelfth Naval District Public Works Office in San Francisco south to San Diego to implement the growing construction program. Commander Cox established an office in the Balboa Park training camp. Some construction projects were already underway at the Coaling Station and Radio Station before Cox arrived. During his short tour of duty Cox oversaw the surveying and acquisition of sites for the new construction, sent information on topography and utility lines to the Bureau, and reviewed the Bureau's preliminary architectural plans for their "fit" into local terrain and utilities. Cox's offfice, in addition, oversaw the wartime construction programs for the local Naval Militia base, Coal Depot, San Pedro submarine base, two radio transmitter sites, and alterations of the exposition buildings to be used for the Training Camp.

Commander Norman Smith was the CEC officer who replaced Cox for his next tour of duty on November 14, 1918 [3]. Smith was to supervise construction of the largest naval complex built in American between the end of the First World War and the buildup for the Second World War. The Marine Corps Advanced Base would be the largest Bureau of Yards and Docks project ever built for the Marines and was intended as a model of its kind. Moreover the construction program was to be executed "to a unified architectural style." More specifically, the buildings were to be "rendered in the Mission style, as the purpose has been to make all the naval establishments at San Diego conserve the ends of taste as well of utility."

Smith increased the local staff of designers through a transfer of Bureau architects and engineers from East Coast to West Coast that amounted to a decentralization of its workforce from Washington. In 1919 Smith recruited four designers from the Bureau and in 1920 nine from the Naval Experimental and Research Laboratory (Bellevue, D.C.) plus others from other Navy offices. (Appendix D lists the men transferred to San Diego.)

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[3]Norman Murray Smith eventually became an Admiral and the Chief of the Bureau of Yards and Docks. Smith, from Williston South Carolina, graduated from the Naval Academy in 1906 and was among the first Academy graduates sent to Rensselaer Polytechnic Institute (Troy, N.Y.) for three years, engineering school. He was therefore one of the first career officers to take control of the Navy's civil engineering program.

The tradition of sending Academy men to Rensselaer continued many years. The greatest number of the officers who had begun their engineering careers outside the Navy, however, were graduates of MIT.

The Bureau transferred part of its workforce to San Diego; first, to continue designing increments to the Marine Corps Base and Air Station projects it already had underway there, and second to design a Naval Training Station. The Training Station was designed in a separate Public Works Office established for that purpose in San Diego under a New York architect, H. Lincoln Rogers, who was serving Naval Reserve Force duties during the war. The project to design the Naval Hospital was held back from San Diego and executed in the Washington office. Indeed, the transfer of workers to San Diego was so substantial that in January 1921 the Bureau delegated to Smith's office the job of preparing plans and specifications for certain roads at the Marine Corps Base "owing to lack of an adequate drafting force" in the Bureau.

The autocratic Bureau did not transfer authority for making decisions to San Diego. The San Diego office, for example, was not authorized to improve specifications for reinforcing concrete; and in December 1921, San Diego wrote for permission to change the steel reinforcing in concrete barracks floors because cracking "has not only been a source for criticism [at the Marine Corps barracks and Air Station] but also in washing down decks, the water passes through to the next floor." And in 1923 the Bureau was still sending completed architectural plans to San Diego asking "preparation of finished drawings for advertising" but instructing the Public Works Officer to complete them "without modifications other than those that are necessary for structural reasons."

The Bureau assigned the Public Works Office the more menial tasks: asking it for site data on drainage and utility lines early in the project; sending it sketches midway in the design process for review; and sending it completed drawings when the construction contract was let so the Public Works inspectors could monitor progress. It often sent architectural plans and asked Public Works draftsmen to do the corresponding working drawings. After a few years, the Bureau eventually delegated more small architectural design tasks to San Diego, until some of the later and less important Hospital buildings were designed completely in San Diego. The turning point came in March 1921, when the Bureau allowed the drawings and specifications for a Marine Corps Base garage and gun shed to have a chain of signatures acknowledging that some designs could come from the bottom up: "Submitted by Commander _____ (CEC) USN, Public Works Officer; Recommended by _____ Project Manager; and, Approved by _____ Chief of Bureau."

The Bureau probably held the design of the Hospital particularly close to its Washington office because its Hospital Section there had the specialized experience and the Bureau of Medicine and Surgery was nearby to suggest floor plans and review every final drawing. The round of reviews included San Diego. For example, in 1923 the San Diego (Balboa Park) Hospital Commanding Officer, the tenant for whom the buildings were being designed, reviewed the North Ward plans and wrote the Bureau of Medicine and Surgery asking whether they intended a third story.

The Hospital represents the Bureau's usual design process more closely than the other three architecturally important facilities in San Diego. It was designed completely in Washington by Navy in-house architects, whereas the Marine Corps Base and Air Station involved consulting architects and the Training Station involved a West Coast office.

The four facilities' construction programs overlapped one another. The Marine Corps Base was first to be initiated, but the Naval Air Station was second to be initiated and first to be completed and occupied. The first Marine Corps Base contract (#2274, January 31, 1918) was for dredging the site, but the first barracks construction contract (#3733, in preparation since 1917 hut not awarded until March 17, 1919) was not completed until the end of 1920. (The Marines had set up an organizational headquarters for the base in a downtown office building October 15, 1919.)

However, the first Naval Air Station construction contract, #2909, was June 29, 1918 for barracks completed in July 1919. The Hospital was the third facility started, with contract #4300 on November 27, 1920, and the Training Station was fourth, with #4375 on March 29, 1921.

The Value of the Program to San Diego

The Chamber of Commerce kept tabs on every dollar the Navy spent on the construction program to relieve the public's uneasiness over having given so much prime land to the Navy. By the end of 1920, when the Marine Corps Base was substantially completed and the Naval Air Station was about half completed, the total value of "work in place" was $5.5 million. By mid-1923, phases had been added to the Marine Corps Base and the Air Station, while the Naval Hospital (the first buildings of which were occupied August 22, 1922) was moving toward completion of its original plan, and the first construction phase of the Training Station was nearly ready to be occupied. The total value of the Navy's construction in mid-1923 was $14.5 million. By mid-1926 the Navy had spent $21.5 million on Eleventh Naval District construction projects.

To give the public "an appreciation of the peacetime returns on the investment," the Chamber reported in 1930 that while "a conservative appraiser says the present value of the gift lands is $10 million," in return the "Naval structural improvements ashore represent an investment of approximately $20 million," from which it expends a monthly $1.6 million for payroll, materials, and supplies, or a total of approximately $20 million per year. An August 2, 1920 Union editorial went so far as to claim that the quarter-million dollar Hospital parcel would "net San Diego within 10 years no less than $45 million conservatively estimated."

Marine Corps Major Osterhaut, moreover, wrote a public relations piece telling the public that the peacetime advantages went beyond payrolls and constructions dollars, because

> Aside from money considerations there have been other features of inestimable value to the city by virtue of its being the location of the Marine Corps Base. Amonth these is the national and international publicity given the city, including that resulting from customary inspection visits by men of national importance. A very unattractive site of swamp and marsh lands has been transformed into a place of striking beauty, enhancing adjoining properties, and making an additional center of great interest to the city as a whole. It makes available a strong body of an internationally known corps of men and officers together with their

> resources for civic purposes, parades, ceremonies, for protective purposes, and even for fire fighting. The men and officers of the U.S. Marine Corps, drawn here by reason of the presence of the Marine Corps Base, have in many instances invested their savings in this vicinity, besides making it their permanent home and place of residence upon retirement.

By 1927 Kettner could say, perhaps with relief, that San Diego had finally been vindicated for paying such a high price to strengthen its economic base: "When history is written fifty years from now, the establishment of these [military] units between 1914 and 1920 will be cited as the starting point of San Diego's real permanent growth and stabilized prosperity."

Building Out the Original Design [4]

The Navy hired contractors to build out the original 1919 "As Projected" Hospital plan in several phases extending from 1920 to 1937. The original 1919 design was realized in large part. The main central cloistered compound with its three courtyard units was built with only minor changes from the original plan. (The medical officers asked for fully developed basement floors and for a last-minute change from two-story to three-story ward buildings to increase capacity.) The buildings along the eastern service road, never clearly identified to begin with, were built generally as projected. Of the northern residential group only one building, the Nurses Quarters, was built as projected. (The northern area was used for additional ward buildings instead. Staff quarters originally intended for the northern area were eventually built farther south.)

The original proposal had gone no farther south than the southern boundary of the original grounds. The hospital group was eventually built out farther south on an additional grant of land. That extension increased the horizontal effect of the facade lines (the cornice, fenestration, and water table lines), extending them all the way south. The same visual level was accomplished all down the line, at the cost of perching the most southerly building on high basements where the terrain sloped off.

The sequence of construction is described building-by-building in the list below. This list is nearly the same as the list of buildings found eligible for the National Register because the Advisory Council's fifty-year cutoff for historic eligibility quite fortunately took in the early architecturally important Hospital compound and excluded the later architecturally unimportant buildings on the periphery. The eligible buildings' Historic American Buildings Survey (HABS) identification numbers are given on the last page of this chapter. Thus the buildings are identified under three systems: the Navy building name, the Navy building number, and the HABS building identification number. The buildings demolished by 1985 were not given HABS building identification numbers. The buildings that had been merged into others and lost their separate identities were not given HABS numbers.

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[4](This section is based on original Navy construction documents, correspondence, early photographs, and field inspections.)

CONSTRUCTION SEQUENCE

Year	Cost (accumulative)	Buildings	Beds (accumulative)
1920-22	$1,000,000 ($1,000,000)	# 1: Administration # 2: Ward A # 3: Operating # 4: Subsistence # 5: Ward B # 6: Power House # 7: Red Cross	275
1922-23	$ 500,000 ($1,500,000)	# 8: Transformer House # 9: Ward C #10: Ward D #11: Service	618
1924-25	$ 500,000 ($2,000,000)	#12: Disinfector #13: Incinerator #14: Lab. & Out Patient #15: North Ward #16: Nurses' Quarters	822
1927-28	$1,000,000 ($3,000,000)	#17: Guinea Pig and Rabbit House #18: Garage at Nurses Quarters #19: Mortuary #20: Contagious Ward #21: Hosp. Corps Barracks #22: Sick Officers Qtrs. #23: Gate House #81: Quarters B #82: Quarters C #83: Quarters D & E	1,035
1936-37	$ 275,000	#36: South Ward	1,150

Field Record photographs 017 through 025 show some of the Hospital buildings newly completed. These are construction progress photos in the archives of the Bureau of Yards and Docks.

1920-1922

The contract for the initial construction of the Hospital was awarded jointly to the Kier Construction Company of San Diego and the Simpson Construction Company of Los Angeles in October 1920. The contract was for the construction of the first six buildings: the Administration Building (#1), Ward A (#2), the Operating Building (#3), the Subsistence Building (#4), Ward B (#5), and the Power House (#6). Work began in November 1920.

Kier had been awarded the 1919 contract for the Naval Air Station's Administration Building. The next stage of the Hospital was awarded to Lange

and Bergstrom, who had been awarded the 1918 and 1919 contracts for the Naval Air Station and who would be awarded the 1921 contract for the Naval Training Station.

The original drawings show what cross-sectional shape the hilltop was graded into. The access road was to run fairly level along the western facade and then drop in elevation to return along the east side. The western row of buildings was set on generally level sites that match the levels of the courtyards. The eastern row of buildings gives the visitor the impression that they rest on the same level base as the interior court, but the eastern row is actually split-level because it has more stories built on the east sides than on the west. For example, Building 9 has four stories on the west and five on the east. The eastern road (Wieber Avenue) services the eastern buildings' loading docks.

The design also disguises the gradual drop in elevation toward the south, where ground level is one story below the central patio. The buildings farther south stand on full height, with basements above ground to carry out the group's horizontal lines.

The six buildings specified in the first contract were constructed over an 18-month period and placed in commission on August 8, 1922. Hospital capacity was about 275 beds. (The goal for the hospital's ultimate bed capacity was rising even as construction went along.) The first phase cost of construction was approximately $1,000,000. A seventh building - the Red Cross Convalescent House (#7, now demolished) - was constructed under separate Navy contract and paid for by the local Red Cross at a cost of about $47,000 in the spring of 1922 and was included in this first group of buildings. That building was not foreseen in the original scheme and was the first deviation from the original overall plan.

1922-1923

The next group of buildings constructed were the small Transformer House (#8, now demolished), Ward C (#9), Ward D (#10), and the Service Building (#11). Construction of the Service Building and the two wards began in October 1922, and was completed by October 1923. The Service Building was designed to house miscellaneous functions to service the Hospital, such as shops and a laundry. The Transformer House, a small utilitarian structure located at the eastern edge of the site, was built early in 1923. Each of the new wards had a capacity of 172 beds, increasing the total capacity of the Hospital to 618 beds. The cost for this phase of construction was approximately $500,000.

1924-1925

In the summer of 1924 construction began on the Disinfector Building (#12, now demolished), the Incinerator Building (#13), the Laboratory & Out Patients Building (#14), the North Ward (#15), and the Nurses' Quarters (#16, now demolished). The Out Patients building served the families of servicemen. All these buildings were completed by the following summer, with the exception of the Disinfector Building; although its foundation had been poured during the summer of 1924, it was completed only in 1928 as part of the adjoining Mortuary (#19, discussed below). The completion of the North Ward created an

enclosed north court, which was finished with geometrical walks. The new ward had a capacity of 204 beds, bringing the total to 822 beds. The cost of construction for this phase was also approximately $500,000.

1927-1928

Between the summer of 1927 and the fall of 1928, nearly all the remaining buildings of the original Hospital were constructed. The Guinea Pig and Rabbit House (#17), a small utilitarian structure used for detecting diseases, was built in June 1927 a garage (#18) for the Nurses' Quarters was built in October 1927 and the Mortuary (#19) was built soon after. By July 1928, the following buildings had been completed: the Contagious Ward (#20), the Hospital Corps Barracks (#21), the Sick Officers Quarters (#22), the Gate House (#23), and several detached houses for some of the Hospital's officers -- the Executive Officer's Quarters (#81, or Quarters B), the Surgeon's Quarters (#82, or Quarters C), and a duplex called Double Quarters (#83, or Quarters D & E). The 150-bed capacity of the Contagious Ward and the 58-bed capacity of the Sick Officers Quarters brought the total capacity of the Hospital to the desired 1,035 beds. The total cost of construction for this group of buildings, including roads, walks, and landscaping, was approximately $1,000,000.

We have the Bureau's construction progress photographs of the Administration Building (Bldg. 1) in the Field Records identified as photographs 032 through 035; the construction progress photographs for the Nurses' Quarters Extension (an addition to Bldg. 16) identified as Field Record Photographs 036 through 042; and, the construction progress photographs for the Executive Officer's Quarters (Quarters B) identified as 043 through 047.

1936-37

The South Ward (#36) filled in the last part of the original compound. It was constructed at a cost of $275,000 between December 1936 and December 1937. It is not of the same construction era as the other buildings, but it derives from the sketch plans of that earlier era. Its construction created an enclosed south court which became equipped with a fountain, walks, and landscaping. The completion of the new ward and last courtyard marked the completion of the original - though modified - scheme for the Hospital as prepared by the Bureau of Yards and Docks in 1920.

We can see the fully filled out form of the hospital in aerial photographs taken in 1928, 1933, and 1938 which have been reproduced in the Field Records as photographs 026 through 031.

The new south court squeezed out the last of the tent wards that had formed part of the Hospital since its expeditionary beginnings. The 1923 annual report had told how the year's epidemics of mumps, measles, diptheria, and scarlet fever had been isolated in a new "model hospital tent camp provided with independent latrines, bathing, and washing facilities ... connected with the city sewer system." (Similar platform tent housing was also seen in the Marine Corps Base and the Training Station of the time). In addition to tents, the hospital built canvass-walled temporary cottages "for

the tuberculosis cases transferred to us." By 1924 the Hospital had removed and stored the covers from 31 of the tent platforms because Navy Hospital corpsmen had been able to move into the newly completed Service Building.

1937-1972

The 35-year period following completion of the original compound was marked by a dramatic expansion of grounds and buildings beyond the boundaries of the original land grant. In April 1937 San Diego voters approved leasing the Navy 15.60 acres of parkland directly west of the Hospital for use as recreational open space for the patients and staff.

In 1939 during the buildup for World War II, voters approved an additional 32.93 acres of land for the Hospital, adjoining the compound to the southeast. In April 1941 the city deeded 21.32 acres immediately east of the previously granted parcel. On the new property the Navy began construction of "H-type" wards (temporary-type wood-frame construction), which would number fifteen by the end of World War II.

The original compound was filled out further on the north end during this period. The Bureau stopped building concrete frames with tile infilled walls. The Medical Storehouse (#37) was a utilitarian reinforced-concrete structure erected. The Sick Officers and Out Patients Building (#38) was built directly east of the Sick Officers Quarters, in a style that carefully matched the older building. A flat-roofed stuccoed wing (#49) joined the north wings of these two buildings, filling in a crosswalk to create interior circulation between the wards. We have included those buildings in the HABS Data Forms, even though they are neither part of the original design nor fifty years old, because they serve to visually integrate the original compound.

The Second World War brought the most dramatic but temporary expansion of the Hospital into other areas of the park. From a total of 56 buildings and 1,424 beds in 1941, the Hospital grew to a total of 241 buildings and 10,499 beds by 1945. Once again the Navy took over the buildings of the 1915 and 1935 Expositions, paying the City of San Diego for their use, and built a pedestrian tunnel under Park Boulevard to connect the Hospital with the Exposition area.

In the 1950s pressure from several sources led to further Hospital development. Between 1953 and 1957, in response to crowding from Korean War casualties and a growing number of convalescent veterans, a nine-story reinforced-concrete surgical building was constructed on the lower ground directly behind the Service Building (on the site of the old Tranformer Building). Its hundreds of beds freed ward buildings in the original compound for new functions. Finally, with the completion of a medical library on the west slope in 1968 and of an outpatient clinic at the north end of the original compound in 1969, major new construction ceased until more Florida Canyon land was acquired in the 1980s.

Internal Changes

The function of the U.S. Naval Hospital evolved through three general stages: (1) In the first years during the first phases of construction the

limited number of buildings served multiple purposes (functions were "doubled up" in buildings designed for single purposes). (2) With the completion of the original compound in the 1930s, the separate functions tended to move out from their earliest locations into their intended separate buildings. (3) Finally, new construction in the 30-year period after 1939 allowed functions to diversify further and move out beyond the original compound. While the interiors of the original buildings were often severely modified to meet the altered functional requirements, their exterior appearances and overall layouts were left largely intact. No major buildings of the original compound were demolished until the 1980s, and then only as part of clearing a site for the new Florida Canyon facility. The central compound appears remarkably much as it did in 1938.

The most condensed functional pattern was in 1923. The Administration Building (#1) at first housed not only the administrative offices and boardroom (on the first and second floors) but also 15 bedrooms, mess room, diet kitchen, and recreation room (all for sick officers on the third and fourth floors) plus a solarium on the roof and the hospital's pharmacy in the basement. Ward B had eye, ear, nose, and throat beds on the first floor, the medical ward on the second, and infectious diseases on the third, with a brig and storage in the basement. The "Operating Pavilion" (Building #3) had the laboratory, x-ray, dentistry, and EENT outpatients on the first floor and general surgery on the second. The Subsistence Building had cold food storage in the basement, galleys and mess halls on the next two floors, and quarters for mess attendants on top.

Then specific functions moved out of the early multiple-function buildings into single-purpose buildings. For example, the sick officers quarters began in floors three and four of the Administration Building, then moved to a new and larger single-purpose Sick Officer Quarters in 1927 (thus allowing Building #1 to fill out with purely administrative functions), and then growing further to occupy half of the new Building #38 in 1941.

The sick officers quarters provided private rooms with attached private toilets, as well as a lounge and dining room for ambulatory patients. The enlisted men got long, open wards with rows of beds, shared toilets and bathrooms, and quiet (seclusion) rooms grouped at one end of each floor. Occasional bed shortages were handled by temporary tent wards.

Nurses had the most acute problem finding living quarters at the Hospital. Nurses were not commissioned officers until the 1930s and they could not live among the male enlisted personnel. In 1923 the Hospital reported that of its 30 nurses, 26 lived in a house a mile away where two rooms had 2 nurses to a room, three rooms held 3 nurses each, and in two rooms there were 4 nurses to a room. "This congested condition has resulted in numerous cases of dissatisfaction, quarrels, requests for change of duty, and resignations, and in my opinion should be remedied as soon as possible." said the Commanding Officer. In 1924 he ordered the upper two floors of Ward Building 9 to be partitioned off into individual nurses' sleeping areas. Plans then accelerated for constructing a separate nurses quarters building to allow Building 9 to return to the ward function for which it had been designed.

Field Record photographs 086 through 091 are photographs of Navy nurses, probably posed for recruiting or public relations purposes.

With the completion of the original compound in the 1930s, the Hospital attained the 1000 beds eventually established as its goal. The geographical pattern was the central Administration (#1), Subsistence (#4) and Service (#11) buildings providing the managerial and logistical support for the staff and for the patients in the flanking ward buildings (#2,5,9,10,15,20,36), with operating rooms, laboratories, X-ray rooms, and outpatient facilities grouped in two separate buildings (#3 and #14) within the central quadrangle. The two earliest ward buildings were each broken into three separate wards for the eye, nose, and throat department, and the urological department (responsible for treating venereal disease). The North Ward housed orthopedic, neuropsychiatry, and convalescent wards on its three floors.

Housing for Hospital staff was provided at the north and south ends of the compound (Nurses' Quarters, #16, and Officers' Quarters, #81-83, respectively.) The new school and barracks building for Hospital Corpsmen (#21) solved, at least in part, the persistent problem of providing housing for the Hospital's enlisted men. This new dormitory freed up space in the Service Building (#11) for the quasi-industrial uses (shops, workrooms, laundry, etc.) for which it was eventually intended, just as the construction of the Sick Officers Quarters (#22) had allowed the Administration Building (#1) to assume exclusively the administrative and managerial functions for which it was designed.

The group of buildings along the rear (east) side of the compound met miscellaneous requirements of a large, self-contained hospital: the so-called Power House (#6), in actuality a boiler plant that supplied steam heat and hot water for all buildings, the Transformer House (#8), the Disinfector Building (#12), the Incinerator Building (#13), the Guinea Pig and Rabbit House (#17), and the Mortuary (#19).

The alterations to individual building interiors were often part of the general evolutionary tendency for the administrative functions to build up within the original buildings as newer patient services were relocated into newer buildings added onto the periphery. Growth and specialization of medical functions caused the Hospital managers to re-locate medical functions and to small specialized rooms. Examples are Building 37, 15, and 2. The pharmacy outgrew a room in Building 1 and took all of Building 37's open storage space to build small office, storage, and dispensary rooms. EENT outgrew a room in Building 14 and took all Ward A (Building 2)'s open hospital bay space to build small waiting cubicles and examination cubicles. Family health care outgrew an outpatients room in Building 14 and took all of North Ward (Building 15)'s open hospital bay space to build many small examination and recovery rooms. Ward A (Building 2)'s floor plan sketches are included in the line drawings section of this report as an example of how large original rooms were broken into small specialized spaces.

Alterations that partitioned the original ward bays into small office cubicles often cut off natural light and air. Our historical vantage point allows us to see that the Bureau gradually relinquished a number of natural

heating, ventilating, and air conditioning (HVAC) features in exchange for power-driven HVAC. The Bureau first sacrificed solaria when it redrew the ward buildings into three-story designs. It later installed dropped ceilings to bring more powerful illumination and controlled heating, but shut off the transom windows that had brought daylight and ventilation into the originally high-ceilinged rooms.

Field Record photographs 059 through 070 show different hospital wards. Please note high ceilings, natural light, and natural ventilation.

The original pedestrian circulation pattern was gradually altered with numerous small improvements such as cutting doors between buildings, extending the covered sidewalks, building suspended vestibules between upper stories of adjacent buildings, and converting short flights of stairs into inclined ramps. In the first year of operation, for example, the Hospital's Commanding Officer asked the Bureau to build stairways up to the second-story porticos in order "to facilitate outside communication and to limit traffic in the interior of the buildings." The outside walkways evolved into a major network of passageways between the different buildings and levels.

Pressure from Growing Hospital Operations

The Hospital cared not only for personnel of the Navy, Marine Corps, and Army, but also for veterans of the Civil War, the Spanish-American War, and World War I. The 1930 statistics showed an average load of 646 beds per day, of which 148 were filled by ex-servicemen hospitalized on behalf of the Veteran's Bureau.

The patient load at the original Hospital compound increased from about 3,500 per year in 1923-24 (with an average daily census of 400-500) to about 5,000 in 1934 (with an average daily census of 800-1,000). Outpatient treatment was a major component of the Hospital's activity; 27,057 such consultations were given in the year 1934 alone. This figure covers routine health maintenance such as checkups and innoculations, not only for sailors but also for their family members.

Field Record photographs 071 through 078 depict Navy men and women at work in the Hospital.

The Hospital Corps School opened on September 1, 1928, as a separate component of the Hospital. The school's mission was to train enlisted personnel as hospital orderlies. The school initially had a staff of five medical officers, two nurses, and fifteen enlisted men who conducted a basic course of instruction lasting 12 weeks. The Barracks (#21) that housed the school was designed to accomodate 180-200 students. With increased enrollment during World War II, the school moved to other buildings on the Hospital grounds leaving Building #21 exclusively as a dormitory for corpsmen.

Field Record photographs 079 through 085 depict training and educating Navy medical personnel.

The peak years of the Hospital's operation were during World War II. Between 1941 and 1945, approximately 172,000 patients were treated; the highest daily census during the war was around 12,000, in late 1944. Many were outpatients, but the number hospitalized was so great that the covered walkways became open-air wards filled with bedridden servicemen. The hospital went from 56 buildings with a bed capacity of 1,424 in 1941, to 241 buildings covering 247 acres, including the Exposition grounds and a convalescent branch in Rancho Santa Fe with a bed capacity of 10,499 in 1945. The Hospital's daily newspaper the Dry Dock, listed famous visitors and dignitaries such as Franklin and Eleanor Roosevelt, and entertainers such as Jimmy Durante and Harpo Marx. The Red Cross and Gray Ladies led community participation in the Hospital's programs.

Field Record photographs 092 through 100 are Navy public relations and news photos.

The Hospital had many civilian employees involved in logistical matters such as maintenance, groundskeeping, cooking, and laundering, rather than technical medical work.

Growing Naval operations pressed the hospital to grow far beyond its original intentions. The Hospital staff grew commensurately with increases in patient loads:

	1927	1935	1941	1945
Medical officers	35-40*	50*	93	159
Nurses	50*	60*	92	530
Hospital corpsmen	170*	250*	517	2,297

*approximate

More Land Grants to the Hospital

The land issue emerged time and again as the Hospital grew. The map here shows the sequence of park land grants that built up the Hospital grounds. Beyond the original 17-acre grant in the center of the ridge, the first additional grant was toward the south end of the ridge that topographically rounded out the Navy's ownership of Inspiration Point.

San Diego chose the ridge's central portion for the original Hospital land grant in order to keep Park Boulevard's landscaping under city control and to keep Inspiration Point proper (at the south end of the ridge) open for public use. Originally a public road passed through the Hospital grounds to give public access to Inspiration Point.

The first Bureau of Yards and Docks drawing (number 91014 approved September 1920) had the capacity for 350 beds. That original size was based on the total medical requirements for the various naval facilities that the Navy expected to be approved for San Diego in the 1918-1919 period. But San Diego's advocates were so successful that Congressional appropriations began adding up to a full Naval Operating Base for San Diego. Even as earth was

being moved to build a 350-bed hospital, the Commanding Officer of the Navy's Balboa Park Hospital unit asked the Bureau to reconsider the size of the facility. He termed the original plans "totally inadequate" because "the most conservative estimate here would indicate the need for a Hospital of at least eight hundred beds."

His suggestions brought the first major changes to the original "As Projected" plan. He suggested increased building heights and changes in the layout rather than requesting additional city land. He asked the Bureau if full basements could be included and a third floor added to the two-story ward buildings shown in the plan. He also suggested that the various residential structures (the Nurses' Quarters, the higher-ranking officers' individual houses, and the Sick Officers Quarters) could be built elsewhere so the "north end of the Hospital grounds [could] be reserved for further ward construction."

The question of land for residential structures arose again in 1924 when the Navy sent a sketch of a proposed Hospital Corpsman's Barracks to the city, asking that a barracks site be demarcated to the south exactly on Inspiration Point.

The San Diego City Council, as required by the city charter, put the proposal for additional land on the ballot in 1925. Public sentiment was so strongly for the Navy that San Diego told the Bureau to go ahead with designs for the barracks on the south promontory before the election. The Council continued to comply with the charter by placing each land grant proposal on the ballot, and ad the years went by the slipping margin of approval, shown in the table below (from Amero's The U.S. Naval Hospital and Balboa Park) disclosed the Hospital's long fall from public favor.

VOTES ON QUESTIONS OF GRANTING OF LAND TO THE NAVAL HOSPITAL

Year	Acreage	Yes	No	% Approved
1920	17.04	9,289	137	98.5
1925	5.46	16,374	1,281	92.7
1937	15.60	17,141	5,278	76.5
1939	32.93	27,393	8,111	77.2
1941	21.32	24,278	5,854	80.6
1979	exchange 36 ac. for 39	89,042	56,232	61.3

The trend was already clear in 1937 when the city, instead of granting outright ownership of the shallow western arroyo for patients' recreational use, granted only a lease until 1961. In 1961 the city built a parking lot there to earn an income from hospital visitors. The later grant deeds had "reverter clauses," stipulations that the land would revert to the city under certain conditions.

The steady shift in transportation from streetcars to automobiles brought increasing obsolescence to the Hospital. At first the grounds had space for parking and deliveries, but it did not make a successful transition from a streetcar stop to drive-in medical center. The Hospital's connection to the city and the Navy bases gradually deteriorated. New construction filled the grounds and forced parking to the perimeter. The western recreation area's conversion to a city parking lot did not cure the functional obsolescence of the hilltop site.

The land issue was raised again in 1972 when a Navy Master Plan study concluded that the Hospital complex as a whole, including the original and the later buildings, suffered from functional obsolescence. The concrete frame and tile block structural system lacked seismic resistance. The Hospital had only short-term renewals of its accreditation. The study stated that the complex contained certain older buildings that should be replaced, probably by new construction at the eastern edge of the existing group, or that the whole hospital should be abandoned and replaced by a new complex elsewhere. It recommended a completely new hospital be built on an alternative site called Murphy Canyon, but eventually the Navy decided to build the new medical center in Florida Canyon, on additional park land immediately adjacent to Inspiration Point.

The Navy and the city the arranged land exchange now in progress in which the Navy gives the city 34.52 acres, including Inspiration Point and most of the buildings described here, in exchange for the Florida Canyon land. (The events and controversies leading to that exchange are described in Appendix A of this report. The new Naval Regional Medical Center is now under construction in Florida Canyon.)

HABS BUILDING NUMBERS

Bldg #	HABS #	Original Name on Construction Drawings
1	CA-1548 A	Administration Building
2	B	Ward A
3	C	Operating Building
4	D	Subsistence Building
5	E	Ward B
6	F	Power House
7	-	Red Cross Convalescent House
8	-	Transformer House
9	G	Ward C
10	H	Ward D
11	I	Service Building
12	-	Disinfector Building
13	M	Incinerator Building
14	J	Laboratory & Out Patients Building
15	K	North Ward
16	-	Nurses Quarters
17	L	Guinea Pig and Rabbit House
18	-	Garage at Nurses Quarters
19	-	Mortuary
20	N	Contagious Ward
21	O	Hospital Corps Barracks
22	P	Sick Officers Quarters
23	T	Gate House
36	U	South Ward
37	V	Medical Storehouse
38	W	Sick Officers & Out Patients
49	X	North Crosswalk
81 (Quarters B)	Q	Executive Officer's Quarters
82 (Quarters C)	R	Surgeon's Quarters
83 (Quarters D & E)	S	Double Quarters

This narrative is a part of a larger project that also documented each individual building on a separate Historic American Buildings Survey (HABS) Data Form. The Administration Building and Quarters B are described more fully in Historic American Buildings Survey (HABS) Outline Forms.

CHAPTER 4: ARCHITECTURAL EFFECTS

The Community Reacts

Bureau public relations statements spoke proudly of the San Diego facilities for their "effective use of red-tile roofing ... [and] buff-colored stucco, trowelled in an irregular wavy pattern to simulate the weathered effect of local specimens of Spanish Mission architecture," and for their success in expressing the "principles of architectural harmony," whose effects were "imposing if not magnificent."

But the general public was not so pleased. It did not understand why the Navy's designs moved away from the ornate Mission style San Diegans expected, and toward a simplicity they did not like. San Diegans assumed that consulting architect Bertrand Goodhue would give them further ornate Exposition-style buildings. But by 1918 Goodhue himself was turning toward more modern, simple designs. He told the Bureau that the new sketches for the Naval Air Station were "vastly better for having the Churriqueresgue ornament deleted." He explained to Marine Corps Base construction managers that "the success of buildings of such simplicity of design as these depends on the manner in which they are stuccoed and in which the various details are carried out."

Austere postwar budgets were another force for simplification. The Navy was obliged to comb out ornnamental and luxurious details from construction plans already drawn and to extend construction schedules to keep the programs going on fewer dollars per year.

Of the four architecturally important facilities the Navy would build in San Diego (the Marine Base, the Air Station, the Training Station, and the Hospital), the Naval Hospital exemplifies how that austerity influenced design.

In the earliest stages of the Hospital's design, the Chamber of Commerce told the public the Hospital design would "conform to the general character of other buildings within the park" and the "character of the architecture [would be the] same as the Marine Base and Naval Air Station." In May 1920 the Bureau sent Congressman Kettner a preliminary perspective sketch of how the Hospital would look, assuring him that "the architectural style used will harmonize with the mission type of California" and that the Bureau would "cooperate in every way to make the Hospital grounds in keeping with the adjacent beautiful city parklands."

By the end of 1921, however, General Pendleton and the Chamber of Commerce were accusing the Bureau of making ruinous simplifications to the agreed-upon layout for the Marine Corps Base. The Bureau pleaded "that the plans could be modified to reduce the ultimate expenditure without injury to the Post," and that, although it was "impossible for people located in San Diego, at such a great distance from Washington, to grasp the necessity for economy in Governmental expenditures, ... it is hoped that they will soon appreciate the conditions and will be pleased with the efforts that are being made to complete projects in San Diego to such an extent that they will be fully usable to the Government."

By the end of 1923, when construction was well underway at the Hospital site, a Chamber of Commerce member protested:

> "I was on the committee that recommended the giving of the present site to the Government, and the ... Navy Department pledge[d] itself to the construction of a most beautiful and artistic building.... We were shown a print of plans and front elevation of a very fine looking building for the central and principal building of the group, but ... I can hardly imagine a more severe, plain and unattractive structure than the one they have erected on the most prominent spot in Balboa Park."

The Chamber forwarded this view to Congressman Kettner and noted that

> "the lack of harmony of the Hospital buildings with the Exposition buildings and their lack of beauty was expressed by quite a number at the joint meeting on Thursday, from which the Committee judges that a considerable portion of our citizens feel the Navy has not successfully carried out its announced intention of installing Hospital buildings which would not only be of use to the government, but also assets to the city from the standpoint of beauty. However, others at the meeting expressed the opinion that the buildings were exceptionally pleasing, but agreed that much could be done to render the present lay-out more attractive."

Kettner carried these criticisms to the Bureau in person, and the Bureau explained its position as best it could:

> "The Bureau's design for the Hospital follows the general type of mission architecture insofar as it can be applied advantageously to buildings of the character required. The structures were intentionally made plain but it does not appear that they are unattractive. The Bureau has had most satisfactory comment on the simplicity and dignity of the architectural effect of the buildings. The Balboa Park exposition buildings, not far from the Hospital, are very much decorated with stucco ornamentation which is unsuitable for Navy Hospital Buildings, not only for the type of building required but also on account of the amount of upkeep necessary for repairs to such ornamentation.... The Bureau has followed closely its sketches for the project. The building on the extreme South of the Hospite site ... will have an ornamental treatment which will enhance the corporative effect of the group. Trees and shrubbery will be developed around all the buildings and will add to their beauty."

Original Landscaping Plans

The Hospital's initial planning and construction were undertaken without a comprehensive landscaping scheme. The original perspective drawing gives only a vague representation of landscaping. Lawns with occasional trees and shrubbery are sketched in casually along the site's western edge (the side the public would see), in the northern residential group, and in the interior courts. The courts are devoid of any special landscaping treatment except for the paths that cut the central court into parterres. Neither do subsequent site plans or aerial photographs made during construction in the 1920s reveal any particular consideration for landscaping.

The two small nursery buildings built in the first stage of construction show the Bureau intended a modest, self-sufficient program for landscaping the grounds. The Bureau generally left new facilities bare and expected the tenants and local Public Works teams to plant as time went along. The Bureau's expectations were especially modest for the Hospital site where soil test bores had shown a thin soil layer over adobe and hardpan, all on top of sandstone bedrock only two feet below the surface. The entire site required extensive surface drains because of the clay below. The thin soil overlay would support vegetation only after conditioning; breaking up the clayey hardpan below.

Rather than treating the soil as the Bureau suggested, the Public Works Officer had loam shifted from one part of the grounds to where it was lacking. His immediate objective was to cover the fine soil that penetrated the Hospital in summer and turned to mud in winter. In addition he expressed concerning that road "grading requires blasting, adds to the dust, and certainly is not conducive to the welfare of the patients."

In 1923 he told the Bureau that the area from the entrance gate to the Administration Building door had

> "been graded, top soiled and planted by the Hospital Force, and is now growing grass .... Some other grading and planting has also been done in the south portion of the reservation around the tent camp, and the Hospital Force has constructed a fountain in the central court, which area is also being top soiled and planted .... The terrace around the Red Cross Convalescent Building will be top soiled and planted in the near future, and the north court, as soon as new construction will allow, will also be top soiled and planted."

Landscaping -- A Response to Public Criticism

Largely in response to public criticism, the Navy began directing resources into ornamental landscaping that would soften the Hospital's spartan visual effect. This phase of development was of a comprehensive plan but was accomplished piecemeal over the next two decades. The cumulative effect was eventually so successful that the Hospital was nominated for the Register of Historic Places as much on the basis of its landscaping as on the basis of its architectural design.

Lush vegetation was gradually built up by a small gardening staff and such crews as the Public Works Officer could spare. By 1935 gardening was far enough along for the then-Commanding Officer to write a public relations piece extolling the gardener's work:

> "As soon as the equipment and patients were moved to the new Hospital from the old War Dispensary, Captain Weiber [the Hospital's first Commanding Officer] turned his attention to the landscaping of the grounds. An English gardener, Mr. William H. Crofts, who had established a reputation as a master gardener and landscaper during ten years on the Duke of Norfolk's estate in Sheffield, England and another ten years in America, had arrived in Southern California to try his success at landscaping in a

subtropical climate. Captain Weiber took him on as the Hospital's head gardener. The result, after 13 years, is a display which can only bring amazing admiration to the hearts of all lovers of symmetry and design, to those capable of seeing and feeling the perfection of beauty that can he attained with California trees, flowers and shrubs when grouped and nursed by the master strokes of an artist. After 13 years, Mr. Crofts is no less active in his ministration to the shruhs and flower beds."

Croft created a gardenlike setting for the Hospital that was in harmony with Balboa Park. Like Kate Sessions, he drew from the local horticultural traditions. His selection of plant varieties is so similar to Kate Sessions' that she is sometimes credited with landscaping the Hospital. Three of the most striking plant groupings in the Hospital -- the stately queen palms of the central court, the hollywood junipers of the south court, and the feathery fern pines lining Stitt Avenue -- are all species popularized hy Sessions. The rich variety of plants listed on the 1985 drawings describing landscaping on the Hospital grounds also include a number of other species introduced or made popular by Sessions. Among these are the eucalyptus, king palm, Italian cypress, jacaranda, silk oak, poinsettia, bougainvillea, primrose, and bird of paradise.

(We have drawn a map showing the locations of the various types of plants. The map is in detail in six large sheets and is found elsewhere in this documentation package.)

Landscaping the Interior Courts

The Hospital's courtyards originated as simple architectural open spaces with one-story covered walkways along their sides, not as tropical gardens with two-story galleries we see there today. Such courtyards with geometric gardens and tall open collonades were well-loved elements of the 1915 Exposition buildings nearby, and came to be used in the Hospital as well.

The process of elaborating the original walkways into a two-story network grew quickly from circulation problems in the original plan. Landscaping the courtyards came more slowly.

Initially the only court to receive landscaping was the central court (behind the Administration Building) which received only an oval green, simple pedestrian walks, and a small fish pond. Young palm tress were planted in the 1920s.

The north court was enclosed by buildings but apparently remained dirt without landscaping (and without any plans for landscaping) several years. The north court was graded in 1922, and from 1923 to 1925 Navy civilian employees brought in topsoil, sprinkler lines, seeded grass, and poured concrete walks that crossed diagonally at the center. They laid out shrubs and hedges in a concentric circle.

In 1935 WPA Project 09-81-NEC #1108 improved the central court fish pond by raising and tiling the walls of the basin. The WPA's colorful tiles include Navy emblems.

The now lush and sunken south court was a tent camp area and not enclosed by buildings until the late 1930s. In 1937 and 1938 two WPA Projects (#209-2003 and #509-2-4/7-15) removed the platform tents, excavated the ground down two to four feet to the present level, built the walks and the lily pond, and planted lawns and shrubs.

The same WPA Project extended and elaborated the formal stairway running down to the western recreation area from the Administration Building. This grand, formal approach with branching stairs, also on axis with the Administration Building entrance, reinforced the secondary east-west axis across the main north-south axis beyond what the original designers had intended. (Other WPA projects installed game courts in the western recreation area because earlier tennis courts had been displaced by continued construction. The WPA also widened Farenholt and Wieber Avenues.)

In the longer view, the Hospital's courtyard gardens, porticos, and staircases grew one at a time into the intricate three-dimensional structure we see today. Those landscape-architecture elements wove the architectural "fabric" more tightly and more richly. The Hospital gradually became a visually interdependant ensemble of buildings and landscaping. It eventually became eligible for the National Register on that strength as a landscaped ensemble, not on the basis of its original design.

Most of the Hospital's architectural character and charm can be experienced moving through courtyards and walkways from one building to another.

Field Record photographs 048 through 058 show various phases of landscaping the Hospital grounds.

Original Surface Effects

The buildings when new had earthy low-keyed textures and colors that blended into the rural setting. The buildings' exteriors were light buff-colored stucco with a sandy (unpainted) texture. The contract called for a stucco finish coat "trowelled in an irregular, wavy surface similar to that on the California State Building at the San Diego Exposition." Further, the stucco was to be tinted with mineral colors a "light buff similar to the color of the aviation barracks at San Diego." The lower bands of stucco on the Hospital Administration Building arcade parapet were to be "brown" where shown on the drawings.

Similarities between the stucco work on the Hospital and the California State Building are difficult to see today. The Hospital's walls are caked with waterproofing paints that mask irregularities. The California State Building shows only semicircular coarse brush strokes on a smooth finish coat that may have been added during repairs and maintenance. The Naval Air Station Administration Building's stucco displays the most surface movement of the group and may be closest to its original state.

The aviation barracks' 1919 contract was the most detailed, talking about working the stucco into "an irregular and wavy surface, representing Old Spanish work." But the Air Station's contract called for a harder-looking,

more light-reflective stucco of "good, hard, durable white marble dust" mixed with specially prepared hydrated lime. The Public Works Officer reported that the new Air Station's stucco was being tinted "with soft shades, such as cream and pink as the color scheme." The Hospital was rustic by comparison.

The Hospital's artificial cut-stone ornaments, such as the fancy architraves over the doorways, were colored buff to match the stucco and bush-hammered for texture. (The casting mixture was one part white cement to three parts grit sand.) The bolster blocks of the walkways's columns were of contrasting brown cast stone. Exposed eaves were painted buff to blend in with the stucco.

The wooden doors and window sashes were in light green paint, perhaps to complement the cupric oxide accumulation on the copper gutters and downspouts.

The interior finish was unpainted pure white lime plaster "trowelled to a smooth hard glossy surface." Its brilliantly light-reflective surface made efficient use of the daylight and the feeble incandescent lighting. The only painted walls were in the toilets, kitchens, and operating rooms.

The doctors using the Hospital were primarily interested in practicality. Within the first year of operations they asked the Bureau to paint the Hospital inside and out. This routine painting built up the leathery coat we see today. A recent shade was a light Florida pink, which in 1986 was being repainted to a light cream, with columns and basements in light gray and tower details in terra-cotta-colored paint.

Alterations to the Original Buildings

Because the buildings' exteriors have not been altered to any significant degree, the 1985 photographs of the exteriors adequately describe the original ones. The camera tends to bring out the classical architectural proportions of the original construction drawings, whereas the firsthand observer finds the original architectural details difficult to make out under the leathery paint.

The buildings' interiors, on the other hand, have in many cases been altered in significant ways. For example, the dropped ceilings, partitions, and floor coverings added since World War II have covered over nearly all the original interiors. Changes in floor plan are documented in the HABS Data Forms for individual buildings. There are few early photographs of the original interiors, and the National Park Service did not request many photographs of the interiors in 1985 because they are not as unusual or significant as the exteriors and the arrangement of the complex as a whole. Moreover, the buildings' interiors have a threadbare quality after fifty years of heavy daily pedestrian traffic. Wearing surfaces have been covered by successively more modern materials.

The condition of the buildings is generally good. They are structurally intact but do not meet current seismic standards. The tile roofing appears to be the original. Functional maintenance has been consistent and adequate.

The Hospital in 1985

The original Hospital group still commands its hilltop site with the same presence as described fifty years ago by its commanding officer:

> "From [Park Boulevard] one looks to the east across the canyon and sees the wide sloping lawns spotted with shade trees - pines, eucalyptus, acacias, cypresses and peppers - the lawns rising to the main thoroughfare of the grounds. This street ... runs directly in front of the three original buildings. The .... Administration Building rises to four stories and has a tower or two more floors on either side of the main entrance. This, like all the other buildings, is of Spanish architecture .... Although the newer buildings were added by stages to the earlier ones over a period of ten years, there was never a change in the essential design, and the present ensemble gives the appearance of a simultaneous and unified growth from one original plan, all the present parts being natural and logical elements of an integral whole."

The group still shows that harmony of style and unity of plan.

The group has changed little in silhouette because physical modifications to the site since the 1930s have been at the lower elevations around the periphery of the original Hospital. The "wide sloping lawns" to the west were reduced to a relatively narrow slope when the city did not renew the lease and filled in the shallow canyon recreation area to create a large parking lot. Flanking the compound on the south and east, for the most part on the lower slopes of the Inspiration Point promontory, are complexes of buildings constructed primarily during and since World War II. The most visually obtrusive of these is an enormous nine-story ward building built in the 1950s. Its more or less axial placement directly east of the Administration Building overwhelms the scale of the original two- to four-story compound. Several newer buildings have been added to the utilitarian structures along the back (east) side of the compound, and an outpatient clinic was attached to its north end in the 1960s. Otherwise, the exterior appearance of the 1920-1937 compound retains a high degree of integrity.

Stylistic harmony arises partly from the consistent use of pastel-painted stucco walls, red-tiled roofs, and cast-stone trim of a restrained Renaissance-Baroque derivation within an overall Spanish Colonial Revival, or Mediterranean, architectural style.

Seen from above, the visual unity derives primarily from the strongly axial and symmetrical arrangement of the central buildings around the three interior courtyards. Seen from the side, visual unity is maintained, even though the site drops off gradually to the south, by using consistent height for windows, belt courses, and cornices to create strong horizontal lines. Wood-sash transoms, which once provided natural ventilation and daylight high up inside the rooms of the original Hospital, remain as an important horizontal visual element. In addition, the drop of the rear (east) road behind the main group minimizes the potential visual disruption by the less orderly utilitarian buildings behind.

The group is visually the better for its fifty years of ageing. The process of tailoring individual gardens and walkways to mend individual problems in appearance and circulation softened and unified the original design. Those landscape architecture elements wove the architectural "fabric" into a richer more unified whole.

In its original form the Hospital might not have qualified for the National Register. But that original architectural character was changed by the addition of the porticos and gardens, and, in 1981 the Woodbridge architectural resources survey found the original complex eligible for the National Register as a landscaped ensemble:

> "[While] the architecture is not distinguished by originality or by refinement of detail, ... of particular note is the contribution of landscaping and elements such as pools, fountains, and walkways to enrich the relatively restrained architectural treatment of the buildings.... The stark simplicity of the architecture is a fine backdrop for romantic landscaping."

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LOCATIONS ABBREVIATED IN ENTRIES ABOVE:

CC - San Diego Chamber of Commerce
CR - California Room of the San Diego Public Library
HS - San Diego Historical Society Library
ML - Medical Library, Naval Hospital, San Diego
NSB - Western Division, Naval Facilities Engineering Command, San Bruno, CA
PH - Command Historian of the Naval Facilities Engineering Command, Port Hueneme, CA
SBA - Federal Archives and Records Center, San Bruno
UC - University of California, Berkeley
WA - National Archives, Washington D.C.

LIKELY SOURCES NOT YET INVESTIGATED:

(a) The Navy Solicitor had all responsibility for acquiring land during this period, rather than the Bureau of Yards and Docks as it did later. The Solicitor's archival real estate records are probably a source of historical information on the Navy's land acquisitions in San Diego.

(b) The 12th Naval District, headquartered in San Francisco, handled construction planning in San Diego until the Navy established a Public Works Office in San Diego. We have not located the 12th Naval District's correspondence concerning San Diego.

(c) The Navy's Bureau of Medicine and Surgery was deeply involved in the Bureau's process of hospital planning. The archives of the Bureau of Medicine and Surgery are another potential source of information.

APPENDIX A: CONVEYING OWNERSHIP TO THE CITY

By the early 1970s the Hospital's further need for expansion, the increasing obsolescence of the older portions, the controversy over whether a growing hospital should situated in Balboa Park, and the city's desire to own the land where the old Hospital stands, all led the Navy to think of leaving the original Hospital site and the city to think of giving them another site. The city did provide another site in Balboa Park for building a new Naval medical center. In exchange the Navy is conveying the original hospital site. The boundary of the land exchange is illustrated in the line drawing titled "Historic District Record Map".

Balboa Park planners, on their part, had long been looking forward to the Navy's departure from the original Hospital parcel and returning it into the park. The Navy's ownership had intruded into the park, had been a highly visible non-conforming use, and had inhibited park planning. Its reintegration would improve access and relieve functional problems.

The nearby Florida Canyon land where the new medical center would be built, on the other hand, from a park-planning point of view, is not seen from downtown, has no view, was to steep for easy development, and would be less useful in the functional plan for the park. The loss of Florida Canyon would be barely noticeable. (Adding 35.934 acres to Navy ownership in Florida Canyon and subtracting 34.534 acres on Inspiration Point.)

The park planners therefore had favored the exchange. The exchange would placate San Diegans by leaving park acreage virtually undiminished. The City would gain a more prominent and useable area for the park in exchange for a less useable area. The reintegration of the Hospital parcel into the park's landholdings would allow planners to re-arrange functions throughout the park as a whole. (Most importantly, they could move non-park functions out from the exposition buildings to new quarters on Inspiration Point.) The non-conforming Navy Hospital would be relocated into a canyon out of sight.

The people of San Diego were divided on the issue on the land exchange. The Navy's eight-year-long search for other sites did not yield a site all parties could agree upon. (The Navy would not break the project into several smaller medical facilities while the public did not welcome a concentration of Navy construction in one part of the city.) The new Medical Center will be the Navy's largest medical facility with 760 beds, the ability to serve 4,000 outpatients per day, and the capacity to train doctors.

The exchange took the form of a "friendly condemnation" that precluded the need to put the transaction on the ballot for the voters approval, and made the City of San Diego legally eligible for certain additional compensation.

In November 1979 Congress authorized the Navy to acquire the Florida Canyon parcel by condemnation or exchange (the Appropriation Committee objected to a major project on leased land). On 8 January 1980, a Complaint in Condemnation and a Declaration of Taking were filed in the Federal District Court in San Diego, thereby resting in the Government fee interest in 35.934 acres in Florida Canyon. With the urging of the City, the Navy changed the

documents to provide for the reversion of the property (including improvements) to the City "in the event that the United States ceases to use the land for Hospital or medical purposes (or purposes related thereto)".

With the condemnation papers in place, the City returned to negotiations with the Navy in September, 1980, with a preliminary focus on drawing Inspiration Point parcel boundaries which would be satisfactory to both parties. Boundaries followed natural land contours. The resulting total acreage for the existing Naval Regional Medical Center, after adding the 35.934 acres in Florida Canyon and subtracting the 34.534 acres on Inspiration Point, is now 75.93 acres, a minor change in the size of the Federally-owned enclave in Balboa Park.

San Diego was still divided concerning the exchange; in response to local criticisms the General Accounting Office reviewed the Navy's site selection, and in April 1981 concluded:

"We believe that the Navy's December 5, 1980 decision to locate its medical center in Florida Canyon is still appropriate."

In July, 1981, Secretary of Defense Weinberger's letter to Mayor Pete Wilson stated: "I know this will be a disappointment for you and many others in San Diego, but a careful and lengthy review leads to the conclusion that it is the right decision..."

To compute the amount of compensation the Navy would owe the city for the exchange, the two parcels (Florida Canyon and Inspiration Point) were to be appraised on the basis of fair market value. "Fair market value" envisions the amount of cash a knowledgeble buyer would most probably pay a knowledgeable seller on the open market. An as-if-vacant approach was agreed upon by both parties in anticipation of exchanging an equal acre-for-acre basis, to be accompanied by a cash compensation for any differences in per-acre values.

Appraisal doctrine required the Inspiration Point parcel to be envisioned as vacant land available for its optimum land use and land value, in this case development for medium density housing. This theoretical requirement obliges the appraiser to deduct the estimated cost of removing any inappropriate improvements, in this case the Hospital buildings, to arrive at an estimate of the value of the land. (It is currently burdened by improvements that did not allow it to reach its highest economic use.) The Navy agreed to deposit the cash for that theoretical demolition cost, and allow the city to use the money to demolish the buildings and recreate the original park landscaping, or for any other purpose. (The city could use the money to improve or maintain the Hospital buildings if it so chose.)

The estimates for differences in values of the two parcels also included the theoretical cost of an access road that would support the theoretical optimum economic use of Inspiration Point, also included the estimated cost of replacing nursery buildings the city would lose in Florida Canyon, and then also added the value of the Navy holding over until July 1988 when the new Hospital was completed.

On top of the compensation above, the Navy also threw in the estimated cost of restoring Inspiration Point to the grass, eucalyptus, and winding paths that existed before the Hospital was built. Again, the city could use this money as it pleased.

Finally, the city would receive the relocation benefits that are legally due in condemnation proceedings.

Each side hired two real property appraisers and several construction cost estimators to establish the value of each element of the transaction. The differences in estimates took on the color of negotiating offers. The final values were:

Land exchange differential to City, mainly due to delay in taking possession of Inspiration Point parcel	$2,344,000
Removing existing improvements	$1,200,000
Replace nursery facilities elsewhere	$2,455,000
Estimated cost of an access road	$ 200,000
Re-landscape	$ 450,000
Relocation benefits due City	$ 211,000
TOTAL COMPENSATION FOR EXCHANGE	$6,860,000

The exchange was consumated in a 1983 Federal District Court judgment in which the Court awarded the City the 34.52 acre Hospital grounds plus $6.8 million as compensation for the government's "taking" of the Florida Canyon site. Because the Navy would continue using the old Hospital while the new, replacement, Hospital is being built, the Court instructed the Navy to place a deed in escrow. That deed will be released to the City in 1988.

Federal agencies normally convey Register properties by means of deeds containing preservation covenants. In this case, the Federal court required the Navy to prepare a deed without such a convenant. The court's final judgment also enjoined the Navy to undertake compliance with the National Historic Preservation Act for the old Hospital site, and, to secure any "clearances" the City would need to remove old Hospital buildings in the course of developing Balboa Park. Hence, the Navy's role in preparing this documentation for the Historic American Buildings Survey.

APPENDIX B: SIGNATURES ON ORIGINAL HOSPITAL CONSTRUCTION DRAWINGS

No.	Building Ident.	Approved	Drawing Ident.	View	Signatures
1.	Administration Building (HABS CA-1548-A)	Sept 1920	BYO 91014	plot/sect	W.P.
			BYD 91016	floor	H.C.S./E.G.L.
			BYD 91019	elev	W.P.
			BYD 91020	sect/elev	W.P./H.C.S.
		Feb 1921	BYO 92672	revised plan	M.S.M.
			BYO 92673	revised elev	M.S.M.
2.	Ward A	Sept 1920	BYO 91024	floor	T.R.E.
	(HABS CA-1548-B)		BYO 91026	elev	W.P./F.P.G.
			BYO 91028	sect	A.C.P.
			BYO 91029	framing	A.A.M.
		(plans for Ward A and Ward B are identical but reversed)			
3.	Operating Building (HABS CA-1548-C)	Sept 1920	BYO 91035	plan/elev	G.P.H./F.W.S.
			BYD 91036	sect/framing	Lamont
4.	Subsistance Building (HABS CA-1548-D)	Sept 1920	BYO 91031	plan	K.W.H.
			BYO 91033	elev	K.W.H.
5.	Ward B (HABS CA-1548-E)	Sept 1920	(plans for Ward A and Ward B are identical but reversed		
6.	Power House (HABS CA-1548-F)	Sept 1920	BYO 91037	plan & elev	M.S.M.
7.	Red Cross Convalescent House (no HABS number)	Feb 1922	not BYD	plan	anon.
				elev	anon.
8.	Transformer House (no HABS number)	Mar 1922	PWO F.7-59	plan/elev	Stevenson/Chovan

No.	Building Ident.	Approved	Drawing Ident.	View	Signatures
9.	Ward C	June 1922	BYD 95862	plan	T.R.E.
			BYD 95864	elev	T.R.E.
	(HABS CA-1548-G)		BYD 95865	sec	T.R.E./H.C.S.
		(plans for Wards C & D are identical except below grade)			
10.	Ward D (HABS CA-1548-H)	June 1922	(plans for Wards C & D are identical except below grade)		
11.	Service Building (HABS CA-1548-I)	June 1922	BYD 95877	elev	A.C.P.
			BYD 958--	plan	illegible
12.	Disinfector Building (no HABS number, absorbed into building No. 13, HABS CA-1548-M)	Nov 1923	PWO F.7-58	elev	M.L. (Matthew Lamont?
13.	Incinerator Building (HABS CA-1548-M)	Mar 1924	PWO F.7-46/ BYD 100002	plan & elev	Kandel/Menzies/Lamont
14.	Laboratory & Out Patients Building (HABS CA-1548-J)	Mar 1924	PWO F.7-46/	elev	Millar/Thompson/Menz
			BYD 99960	plan	
15.	North Ward	Mar 1924	PWO F.7-46/	plan	Millar/Menzies BYD 99962
	(HABS CA-1548-K)		BYD 9996-	elev	illegible
16.	Nurses Quarters	July 1923	BYD 100004	elev	J.M. BYD 100006
	plan J.M. (no HABS number)				
17.	Guinea Pig and Rabbit House (HABS CA-1548-L)	1927	no drawings		

No.	Building Ident.	Approved	Drawing Ident.	View	Signatures
18.	Garage at Nurses Quarters (no HABS number)	Apr 1927	PWO NH16/N13-1(2) BYD 103853	plan & elev	Menzies
19.	Mortuary	Jan 1927	BYD 101862	elev & plan	J.M.R./illegible
	(no HABS number, absorbed into building No. 13, HABS CA-1548-M)				
20.	Contagious Ward (HABS CA-1548-N)	Jan 1927	BYD 101843 BYD 10184- BYD 101847	plan elev sect	R.L.S R.L.S. R.L.S.
21.	Hospital Corps Barracks (HABS CA-1548-O)	Jan 1927	BYD 10304- BYD 103041	elev plan	Meakin Meakin
22.	Sick Officers Quarters (HABS CA-1548-P)	July 1927	BYD 103644 BYD 103642	elev plan	Millar Millar
23.	Gate House Gateway Plaque Over Gate (HABS CA-1548-T)	July 1927 June 1928 April 1932	BYD 101863 BYD 104901 PWO NH16/N3-4(4)	plan & elev plan & elev	R.S.H. K. Schmidt W.L.M.
B	Executive Officer's Quarters (HABS CA-1548-Q)	Jan 1927 Jan 1927 June 1927	BYD 103057 BYD 103058 PWO NH16/N4-1(6)	plan elev extra reinf.	Hart Hart H.C.P.
C	Surgeon's Quarters (HABS CA-1548-R)	Jan 1927	BYD 103058 BYD 103057	elev plan	Hart Hart tr. by Schmidt
D-E	Double Quarters	Jan 1927	BYD 103062	elev	Hart BYD 103061
plan	Hart (HABS CA-1548-S)				tr. by Schmidt

No.	Building Ident.	Approved	Drawing Ident.	View	Signatures
N	North Quadrangle	Mar 1925	PWO F.7-15 34	plan for walks	D.G.M. & A.C.B.
M	Central Court (Main Court)	Mar 1921 Mar 1922	BYD 92967 BYD 95425/	fndtn for walks plan for walks	W.P./E.P.G. D.S. Ferguson PWO F.7-15
S	South Patio	Oct 1936	PWO NH16/N1-2(7) PWO NH16/N1-2(8)	plan pergola	L.C. Winans L.C. Winans
P	Plaza Court (paved over as Road "C")	April 1928	BYD 105421 PWO NH16/N2-1(16)	plan	A.C.B.
T	Terrace	Aug 1928	BYD 106080/		PWO NH16/N2-3(4)
elev & plan		M -----			
-	Tents		- 1927	il.	plot plan
F.S.C.					
-	Site Plans	Jun 1919 - 1920 Jul 1920 il.(1920?) Jun 1921 Mar 1922 Jun 1922 Jun 1923 Mar 1924 Jun 1924 Jan 1927 Jul 1927 n.d. Mar 1928 Aug 1928 - 1929 Jun 1938	PWO F.7-1 Contract 4300 PWO F.7-2 il. PWO F.7-1 BYD 95423 PWO F.7-1 PWO F.7-1 PWO F.7-46 PWO 7-1-4 BYD 101841 BYD 103641 PWO F.7-15 BYD 105423 BYD 106080 PWO NH16/N2-1(34) PWO	proposed site hospital group topographic map initial bldgs imprvmts to date imprvmts to date imprvmts to date plot plan contours & pads south end Bldg 22 location central, roads south grading south walks north end complete complex	Menzies W.P. L.L.H. illegible none given none given none given C.B.S. - T.M. none given R.L.S.---- Millar D.S. Ferguson A.C.B. M----- A.C.B. none given

APPENDIX C:

SAN DIEGO PUBLIC WORKS OFFICE EMPLOYEES

1919

5 draftsmen transfer in, 4 from Bureau:

Huntington Barker
L.L. Huot
W.L. Menzies
W.O. Teasdale
N. Urling

Correspondence mentions 4 resignations:

W.B. Anderson
-- Howard
E.T. Jones
C.M. Knudtson

1920

In September and October 11 draftsmen transfer in, 9 from Bellevue:

E.A. Adt	Architectural	$ 9.20
Fred S. Callendar	Structural Chargeman	$11.76
Alexander L. Chovan	Structural Chargeman	$10.80
George P. Hales	Architectural Chargeman	$11.60
Matthew Lamont	Structural	$ 8.80
Thos. F.J. Maguire	Mechanical	$10.00
Daniel G. Malcolm	Architectural	$ 8.40
Harold C. Platt	Structural	$ 7.60
C. Boone Sadler	--	--
Frank W. Stephenson	Architectural	$ 9.28
Robert H. Wiese	Architectural	$ 5.44

Correspondence mentions 1 resignation:

Huntington Barker	--	--

June list of 7 staff draftsmen:

Huntington Barker	Architectural	$ 8.40
J.M. Cohen	Computing	$ 9.60
L.L. Huot	Architectural	$ 7.20
W.L. Menzies	Architectural	$ 9.60
B.F. Randel	Mechanical	$ 9.60
W.O. Teasdale	General	$ 7.20
Neil W. Urling	--	$ 7.20

1921

February list of 18 staff draftsmen

Adt	Architectural	$10.40
Callendar	Structural Chargeman	$12.48
Carnachan	Electrical	$ 7.12
Chovan	Structural Chargeman	$12.08
Ferguson	Topographical	$ 5.44
Cohen	Computer	$10.00
Hales	Architectural chargeman	$12.88
Huot	Architectural	$ 7.12
Lamont	Structural	$10.00
Malcolm	Architectural	$ 9.12
Menzies	Architectural	$10.00
Plat	Structural	$ 7.60
Randel	Mechanical	$10.00
Sadler	Structural	$10.00
Stevenson	Architectural	$10.00
Teasdale	Structural	$ 7.60
Wiling	Architectural	$ 7.12
Wiese	Architectural	$ 5.44

The 1923 list had 16 draftsmen